2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2008
Secretary of State

DOCUMENT# F05000000937

Entity Name: CARLIN CONTRACTING CO., INC.

Current Principal Place of Business:

454 BOSTON POST RD
WATERFORD, CT 06385

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 300
WATERFORD, CT 06385

New Mailing Address:

FEI Number: 06-0936385 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTC ( ) Delete
Name: CAREY, BRIAN
Address: 454 BOSTON POST RD
City-St-Zip: WATERFORD, CT 06385

Title: V ( ) Delete
Name: HAESELER, NELSON
Address: 454 BOSTON POST RD
City-St-Zip: WATERFORD, CT 06385

Title: SD ( ) Delete
Name: DONNELLY, PATRICIA
Address: 454 BOSTON POST RD
City-St-Zip: WATERFORD, CT 06385

Title: VC ( ) Delete
Name: CAREY, MONA
Address: 454 BOSTON POST RD
City-St-Zip: WATERFORD, CT 06385

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMIE YORK VP 02/28/2008
Electronic Signature of Signing Officer or Director Date