

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004334

FILED
Feb 04, 2009
Secretary of State

Entity Name: CAMBRIDGE CONSTRUCTORS, INC.

Current Principal Place of Business:

109 LYON STREET
MCMINNVILLE, TN 37110

New Principal Place of Business:

Current Mailing Address:

109 LYON STREET
MCMINNVILLE, TN 37110

New Mailing Address:

FEI Number: 62-1116455

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: P () Delete
Name: ELLIOTTQ, JOHN
Address: 1150 MCCLAIN RD.
City-St-Zip: MORRISON, TN 37357

Title: VS () Delete
Name: BRYANT, JAMES
Address: 858 BONE CAVE RD.
City-St-Zip: ROCK ISLAND, TN 38581

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ELLIOTT, JOHN D MR
Address: 1150 MCCLAIN RD.
City-St-Zip: MORRISON, TN 37357

Title: VS (X) Change () Addition
Name: BRYANT, JAMES L MR
Address: 858 BONE CAVE RD.
City-St-Zip: ROCK ISLAND, TN 38581

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: JOHN ELLIOTT

P

02/04/2009

Electronic Signature of Signing Officer or Director

Date