

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002762

FILED
Mar 20, 2009
Secretary of State

Entity Name: ENGINEERS CONSTRUCTORS, INC.

Current Principal Place of Business:

125 SOUTH CONGRESS STREET
STE 1100
JACKSON, MS 39201

New Principal Place of Business:

Current Mailing Address:

P O BOX 22625
JACKSON, MS 392252625

New Mailing Address:

FEI Number: 75-2978952

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEELY, STAN
2600 LAKE LUCIEN DRIVE
STE 117
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

KEELY, STAN
2301 LUCIEN WAY
STE 300
MAITLAND, FL 32751 US

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:

03/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: NEEL, W. HIBBETT
Address: 125 SOUTH CONGRESS STREET - STE 1100
City-St-Zip: JACKSON, MS 39201

Title: VC () Delete
Name: SCHAFER, J. GORMAN
Address: 16 GASTON AVENUE
City-St-Zip: FAIRHOPE, AL 36532

Title: SD () Delete
Name: EXLEY, SLADE F
Address: 125 SOUTH CONGRESS STREET - STE 1100
City-St-Zip: JACKSON, MS 39201

Title: PD () Delete
Name: O'KEEFE, FRANK L
Address: 125 SOUTH CONGRESS STREET - STE 1100
City-St-Zip: JACKSON, MS 39201

Title: VP () Delete
Name: WALKER, ROBERT R
Address: 125 SOUTH CONGRESS STREET - STE 1100
City-St-Zip: JACKSON, MS 39201

Title: T () Delete
Name: ROBINSON, J. CLARK
Address: 125 SOUTH CONGRESS STREET - STE 1100
City-St-Zip: JACKSON, MS 39201

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: NEEL, WALTER H
Address: 125 SOUTH CONGRESS STREET - STE 1100
City-St-Zip: JACKSON, MS 39201

Title: VC (X) Change () Addition
Name: SCHAFER, JOHN G
Address: 16 GASTON AVENUE
City-St-Zip: FAIRHOPE, AL 36532

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: SLADE F EXLEY

SD

03/20/2009

Electronic Signature of Signing Officer or Director

Date