2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2009
Secretary of State

DOCUMENT# G68335

Entity Name: EXCLUSIVE CONTRACTORS, INC.

Current Principal Place of Business:

% LIZ HARVEY BURSE
277 10TH AVENUE
BARTOW, FL 33830

New Principal Place of Business:

Current Mailing Address:

% LIZ HARVEY BURSE
277 10TH AVENUE
BARTOW, FL 33830

New Mailing Address:

FEI Number: 59-2345574 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURSE, LIZ HARVEY
277 10TH AVENUE
BARTOW, FL 33830 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: PTD ( ) Delete
Name: BURSE, JASON C
Address: ROUTE 3 BOX 842
City-St-Zip: BARTOW, FL 33830

Title: DVS ( ) Delete
Name: BURSE, LIZ HARVEY
Address: ROUTE 3 BOX 842
City-St-Zip: BARTOW, FL 33830

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LIZ HARVEY BURSE VP 04/21/2009
Electronic Signature of Signing Officer or Director Date