2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H91923

Entity Name: AKERBLOM CONTRACTING, INC.

FILED Mar 21, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

2017 SW 28TH TERR. 2064 SW 28TH TERR.

FT. LAUDERDALE, FL 33312 FT. LAUDERDALE, FL 33312

Current Mailing Address: New Mailing Address:

2017 SW 28TH TERR. 2064 SW 28TH TERR.

FT. LAUDERDALE, FL 33312 FT. LAUDERDALE, FL 33312

FEI Number: 59-2643807 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

AKERBLOM, CARL E. AKERBLOM, CARL E PDC 23401 SW ARROWROOT ST 2017 S.W. 28 TERR. FT. LAUDERDALE, FL 33312 INDIANTOWN, FL 34956 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.

Title:

SIGNATURE: CARL E. AKERBLOM 03/21/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

PDC () Delete Title: (X) Change () Addition AKERBLOM, CARL E., Name: Name: AKERBLOM, CARL E PDCT 2017 S.W. 28TH TERR. 23401 SW ARROWROOT ST Address: Address: City-St-Zip: FT. LAUDERDALE, FL City-St-Zip: INDIANTOWN, FL 34956 US

Title: Title: **VDCT** (X) Change () Addition () Delete AKERBLOM, CARL E, AKERBLOM, JEANNE Name: Name:

2017 SW 28TH TERRACE 23401 SW ARROWROOT ST Address: Address: FT. LAUDERDALE, FL INDIANTOWN, FL 34956 US City-St-Zip: City-St-Zip:

(X) Delete Title: Title: () Change () Addition

AKERBLOM, JEANNE Name: Name: 2017 SW 28 TERR. Address: Address: City-St-Zip: FT. LAUDERDALE, FL City-St-Zip:

Title: **VDS** (X) Delete Title: () Change () Addition

AKERBLOM, JEANNE Name: Name: Address: 2017 SW SW 28 TERR Address: City-St-Zip: FT LAUDERDALE, FL 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: JEANNE AKERBLOM S 03/21/2009