

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K51040

FILED
Apr 07, 2006
Secretary of State

Entity Name: SPECTRUM CONTRACTING, INC.

Current Principal Place of Business:

2629 SOUTH HORSESHOE COURT
NAPLES, FL 34104

New Principal Place of Business:

2629 SOUTH HORSESHOE DRIVE
NAPLES, FL 34104

Current Mailing Address:

2629 SOUTH HORSESHOE COURT
NAPLES, FL 34104

New Mailing Address:

2629 SOUTH HORSESHOE DRIVE
NAPLES, FL 34104

FEI Number: 65-0425707

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEZESHKAN, FARHAD F.
2606 S. HORSESHOE DRIVE
NAPLES, FL 34104 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: DPT () Delete
Name: PEZESHKAN, F. FRED,
Address: 2606 S. HORSESHOE DRIVE
City-St-Zip: NAPLES, FL 34104 US

Title: DVS () Delete
Name: CARSELLO, ROBERT,
Address: 2606 S. HORSESHOE DRIVE
City-St-Zip: NAPLES, FL 34104 US

Title: V () Delete
Name: SCHALLERT, JOHN B.C.,
Address: 2629 S HORSESHOE COURT
City-St-Zip: NAPLES, FL 34104 US

Title: V () Delete
Name: VALENTINE, ROBERT
Address: 2629 S HORSESHOE COURT
City-St-Zip: NAPLES, FL 34104 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: P (X) Change () Addition
Name: SCHALLERT, JOHN B.C.,
Address: 2629 S HORSESHOE DRIVE
City-St-Zip: NAPLES, FL 34104 US

Title: V (X) Change () Addition
Name: VALENTINE, ROBERT
Address: 2629 S HORSESHOE DRIVE
City-St-Zip: NAPLES, FL 34104 US

Title: V () Change (X) Addition
Name: WILSON, TERRY M
Address: 2629 S HORSESHOE DRIVE
City-St-Zip: NAPLES, FL 34104 US

I hereby certify that the information supplied with this filing does not qualify for the 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 BC SCHALLERT

P

04/07/2006

Electronic Signature of Signing Officer or Director

Date