2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 18, 2008
Secretary of State

DOCUMENT# K51040

Entity Name: SPECTRUM CONTRACTING, INC.

Current Principal Place of Business:

3530 KRAFT ROAD
SUITE 100
NAPLES, FL 34105 US

New Principal Place of Business:

Current Mailing Address:

3530 KRAFT ROAD
SUITE 100
NAPLES, FL 34105 US

New Mailing Address:

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.
3530 KRAFT ROAD
SUITE 100
NAPLES,, FL 34105 US

Name and Address of New Registered Agent:

VALENTINE, ROBERT D
3530 KRAFT ROAD
SUITE 100
NAPLES,, FL 34105 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: ROBERT D. VALENTINE 04/18/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete
Name: PEZESHKAN, F. FRED,
Address: 3530 KRAFT ROAD SUITE 100
City-St-Zip: NAPLES, FL 34105 US

Title: P ( ) Delete
Name: SCHALLERT, JOHN B.C.,
Address: 3530 KRAFT ROAD SUITE 100
City-St-Zip: NAPLES, FL 34105 US

Title: V ( ) Delete
Name: VALENTINE, ROBERT
Address: 3530 KRAFT ROAD SUITE 100
City-St-Zip: NAPLES, FL 34105 US

Title: V ( ) Delete
Name: WILSON, TERRY M
Address: 3530 KRAFT ROAD SUITE 100
City-St-Zip: NAPLES, FL 34105 US

Title: V ( ) Delete
Name: SPADORCIA, JAMES
Address: 3530 KRAFT ROAD SUITE 100
City-St-Zip: NAPLES, FL 34105

Title: V ( ) Delete
Name: BALDI, RICHARD
Address: 3530 KRAFT ROAD SUITE 100
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: V (X) Change ( ) Addition
Name: VALENTINE, ROBERT D
Address: 3530 KRAFT ROAD SUITE 100
City-St-Zip: NAPLES, FL 34105 US

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: ROBERT D. VALENTINE V 04/18/2008
Electronic Signature of Signing Officer or Director Date