

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L06097

FILED
Mar 06, 2008
Secretary of State

Entity Name: CONTRACTORS TOOL SERVICE, INC.

Current Principal Place of Business:

5409 EDGEWATER DR
ORLANDO, FL 328109 US

New Principal Place of Business:

Current Mailing Address:

5409 EDGEWATER DR
ORLANDO, FL 328109 US

New Mailing Address:

FEI Number: 59-2959112

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAMBERS, JAMES EDWARD
9385 FLORENCE AVENUE
APOPKA, FL 32703 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: PD () Delete
Name: CHAMBERS, JAMES EDWA, RD
Address: 9385 FLORENCE AVENUE
City-St-Zip: APOPKA, FL 32703

Title: STD () Delete
Name: CHAMBERS, GEORGE SAMUEL
Address: 25715 BASS RD
City-St-Zip: ASTOR, FL 32102

Title: V () Delete
Name: CHAMBERS, LISA M
Address: 9385 FLORENCE AVENUE
City-St-Zip: APOPKA, FL 32703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JAMES CHAMBERS

PD

03/06/2008

Electronic Signature of Signing Officer or Director

_____ Date