

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000035499

FILED  
Apr 24, 2009  
Secretary of State

**Entity Name:** CONTRACTOR ALLIANCE PROGRAM, LLC.

**Current Principal Place of Business:**

2605 S. MACDILL AVE  
SUITE D  
TAMPA, FL 33629 US

**New Principal Place of Business:**

3035 TURTLE BROOKE  
CLEARWATER, FL 33761 US

**Current Mailing Address:**

2605 S. MACDILL AVE  
SUITE D  
TAMPA, FL 33629 US

**New Mailing Address:**

3035 TURTLE BROOKE  
CLEARWATER, FL 33761 US

**FEI Number:** 26-2363514

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TAMAYO, ANDREW  
2605 S. MACDILL AVE  
SUITE D  
TAMPA, FL 33629 US

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

TAMAYO, ANDREW  
3035 TURTLE BROOKE  
CLEARWATER, FL 33761 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:

04/24/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: JADDS, LLC.  
Address: 2605 S. MACDILL AVE SUITE D  
City-St-Zip: TAMPA, FL 33629 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: JADDS, LLC.  
Address: 3035 TURTLE BROOKE  
City-St-Zip: CLEARWATER, FL 33761 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DIANA TAMAYO

MGRM

04/24/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date