2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27351

FILED May 27, 2007 Secretary of State

Entity Name: AMERICAN SUBCONTRACTORS ASSOCIATION OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:			
	ER RIDGE DR MENT, FL 32533 US						
Current Mailing Address:			New Maili	New Mailing Address:			
	ER RIDGE DR MENT, FL 32533 US						
n accordan	ce with s. 607.193(2)(b), F.S., t	he corporation did not recei	=	e.	Certificate of Status	. ,	
vame and	Address of Current Reg	istered Agent:	Name and	Address of	New Registered Ag	ent:	
	, JAMIE ER RIDGE DR MENT, FL 32533 US						
	named entity submits this e of Florida.	statement for the purpos	se of changing i	ts registered	office or registered a	gent, or both,	
SIGNATUF	RE:						
	Electronic Signature	of Registered Agent			Date		
OFFICERS	S AND DIRECTORS:		ADDITION	IS/CHANGES	TO OFFICERS AN	D DIRECTORS	
Fitle: Name: Address: City-St-Zip:	D () Delete WALTERS, WOODY 39001 N PALAFOX PENSACOLA, FL 32523		Title: Name: Address: City-St-Zip:	D (X WATTERS, W 39001 N PALA PENSACOLA,	AFOX		
Fitle: Name: Address: City-St-Zip:	P () Delete WONDERS, ED 375 N 9TH AVE. PENSACOLA, FL 32502		Title: Name: Address: City-St-Zip:	() Change () Addition		
Fitle: Name: Address: City-St-Zip:	D () Delete EDWARDS, RICK 18 STUMPFIELD ROAD PENSACOLA, FL 32503		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Vame: Address:	D () Delete MERRITT, CHIP 4139 N DAVIS HWY. PENSACOLA, FL 32503		Title: Name: Address: City-St-Zip:	() Change () Addition		
City-St-Zip:			Title:	() Change () Addition		
City-St-Zip: Fitle: Name: Address: City-St-Zip:	D () Delete HARRIS, PHIL 6665 CHUMUCKLA HWY PACE, FL 32571		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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WOODY WATTERS D 05/27/2007