## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000041342

Entity Name: DRAWDY BROTHERS CONSTRUCTION II, INC.

FILED Jan 19, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
2945 W. MIDWAY RD. FT. PIERCE, FL 34981			
Current Mailing Address:		New Mailing Address:	
2945 W. MIDWAY RD. FT. PIERCE, FL 34981			
FEI Number: 6	65-1022657 FEI Number Applied For() FEI Nu	mber Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:			
DRAWDY, PHILLIP 2945 W MIDWAY ROAD FORT PIERCE, FL 34981 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:			
	Electronic Signature of Registered Agent		Date
Election Campaign Financing Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete DRAWDY, PHILLIP 10690 W MIDWAY FORT PIERCE, FL 34945	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	VP ( ) Delete DRAWDY, TROY 9701 MULLER RD FORT PIERCE, FL 34945	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	VP () Delete DRAWDY, PHILLIP D VP 12000 W. MIDWAY ROAD FORT PIERCE, FL 34945 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	SEC () Delete POTTORFF, JENNIFER D SEC 1801 S. HEADER CANAL ROAD FORT PIERCE, FL 34945	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	VP () Delete DRAWDY, JUSTIN E 2945 WEST MIDWAY ROAD FORT PIERCE, FL 34981	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	VP () Delete FARRAR, REBECCA 2945 WEST MIDWAY ROAD FORT PIERCE, FL 34981	Title: Name: Address: City-St-Zip:	()Change ()Addition

SIGNATURE: PHILLIP DRAWDY P 01/19/2009

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.