

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000057476

FILED  
Mar 19, 2009  
Secretary of State

Entity Name: ER RESIDENTIAL CONTRACTOR, INC.

## Current Principal Place of Business:

10982 ARBORVIEW BLVD  
ORLANDO, FL 32825

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 5489  
WINTER PARK, FL 32793

## New Mailing Address:

FEI Number: 59-3651840

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PROFESSIONAL ACCOUNTANTS & CONSULTANTS, IN  
2471 E SEMORAN BLVD  
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: RODRIGUEZ, EDGAR  
Address: 10982 ARBORVIEW BLVD  
City-St-Zip: ORLANDO, FL 32825

Title: VP (X) Delete  
Name: MELGAREJO, FRANCISCO  
Address: SUNBAY APTS, 7005 ALOMA AVE APT D  
City-St-Zip: WINTER PARK, FL 32792

Title: S (X) Delete  
Name: FEIN, JOSE L  
Address: 7904 PINE CROSSING CIR.  
City-St-Zip: ORLANDO, FL 32807

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: RODRIGUEZ, EDGARD  
Address: 10982 ARBORVIEW BLVD  
City-St-Zip: ORLANDO, FL 32825

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: EDGARG RODRIGUEZ

PD

03/19/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date