

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000112878

Entity Name: ABICCA CONTRACTING, INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

5668 STATE HWY 20 E
FREEPORT, FL 32439

New Principal Place of Business:

Current Mailing Address:

5668 STATE HWY 20 E
FREEPORT, FL 32439

New Mailing Address:

FEI Number: 56-2405772

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABICCA, FRANK A
5668 STATE HWY 20 E.
FREEPORT, FL 32439 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

OFFICERS AND DIRECTORS:

Title: PSDT () Delete
Name: ABICCA, FRANK A
Address: 5668 HWY 20 E.
City-St-Zip: FREEPORT, FL 32439

Title: TRS () Delete
Name: ABICCA, TINA M MRS.
Address: 5668 STATE HWY 20 E.
City-St-Zip: FREEPORT, FL 32439 US

Title: SEC () Delete
Name: EVERHART, SAMUEL J MR.
Address: 982 DON GRAFF
City-St-Zip: FREEPORT, FL 32439 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ABICCA, FRANK A
Address: 5668 HWY 20 E.
City-St-Zip: FREEPORT, FL 32439

Title: T (X) Change () Addition
Name: ABICCA, TINA M MRS.
Address: 5668 STATE HWY 20 E.
City-St-Zip: FREEPORT, FL 32439 US

Title: S (X) Change () Addition
Name: EVERHART, SAMUEL J MR.
Address: 982 DON GRAFF
City-St-Zip: FREEPORT, FL 32439 US

Title: AS () Change (X) Addition
Name: BISHOP, CHAD L MR.
Address: 139 INEZ CIRCLE
City-St-Zip: FREEPORT, FL 32439 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 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: FRANK ABICCA

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date