## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000150075

Entity Name: RACZAK CONTRACTING, INC.

FILED Apr 26, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

4055 PACKARD DRIVE 12282 STOCKBRIDGE CT. N. JACKSONVILLE, FL 32246 JACKSONVILLE, FL 32258

**Current Mailing Address: New Mailing Address:** 

4055 PACKARD DRIVE 12282 STOCKBRIDGE CT. N. JACKSONVILLE, FL 32246 JACKSONVILLE, FL 32258

FEI Number: 90-0153803 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

RACZAK, ANDRE L RACZAK, ANDREA L 4055 PAĆKARD DRIVE 12282 STOCKBRIDGE CT. N. JACKSONVILLE, FL 32246 JACKSONVILLE, FL 32258 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: ANDREA L. RACZAK 04/26/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete (X) Change ( ) Addition RACZAK, ANDREA L RACZAK, ANDREA L Name: Name: 4055 PACKARD DRIVE 12282 STOCKBRIDGE CT. N. Address: Address: City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: JACKSONVILLE, FL 32258

Title: Title: (X) Change ( ) Addition () Delete Name: Name:

RACZAK, THOMAS J RACZAK, THOMAS J 4055 PACKARD DRIVE Address: 12282 STOCKBRIDGE CT. N. Address: JACKSONVILLE, FL 32258 JACKSONVILLE, FL 32246 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANDREA RACZAK D 04/26/2005