

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2008 8:00 am
Secretary of State

01-15-2008 90035 028 ***150.00

DOCUMENT # P03549

1. Entity Name
CONTRACTORS BONDING AND INSURANCE COMPANY



Principal Place of Business
**1213 VALLEY STREET
PO BOX 9271, QUEEN ANNE STATION
SEATTLE, WA 98109**

Mailing Address
**1213 VALLEY STREET
PO BOX 9271, QUEEN ANNE STATION
SEATTLE, WA 98109**

40004147



01032008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
91-1082952

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 32399-0000**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	V
NAME	BYERS, LARRY
STREET ADDRESS	34468 8TH AVE SW
CITY-ST-ZIP	FEDERAL WAY, WA 98023
TITLE	CD
NAME	SIRKIN, DONALD
STREET ADDRESS	4735 WEST BERTONA
CITY-ST-ZIP	SEATTLE, WA 98199
TITLE	DS
NAME	ELAND, R KIRK
STREET ADDRESS	3439 MAGNOLIA BLVD. W
CITY-ST-ZIP	SEATTLE, WA 98199
TITLE	T
NAME	OGLE, ROBERT M
STREET ADDRESS	29621 60TH CT SOUTH
CITY-ST-ZIP	AUBURN, WA 98001
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ **Donald Sirkin, CEO/** **January 7, 2008 800-765-2242**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR President Date Daytime Phone #