

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000030050

FILED  
Jan 15, 2007  
Secretary of State

**Entity Name:** CONTRACTING SPECIALISTS INCORPORATED - SOUTH EAST

**Current Principal Place of Business:**

1460 SW 3RD STREET  
SUITE B-9  
POMPAÑO BEACH, FL 33069

**New Principal Place of Business:**

**Current Mailing Address:**

453 SOUTH MAIN STREET  
ATTLEBORO, MA 02703

**New Mailing Address:**

**FEI Number:** 20-0734329

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FELDMAN, ANDREW M ESQ.  
2655 LE JEUNE ROAD  
5TH FLOOR  
CORAL GABLES, FL 33134 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: MR. ( ) Delete  
Name: TIPNIS, ABHIJIT PRES  
Address: 701 BLUEBIRD LANE  
City-St-Zip: PLANTATION, FL 33324 US

Title: MR. ( ) Delete  
Name: JOHNSON, MARK A TRES.  
Address: 7 DOROTHY WAY  
City-St-Zip: BOURNE, MA 02532 US

Title: MR. ( ) Delete  
Name: FRIGON, WALLACE L CEO  
Address: 145 SOUTH WASHINGTON STREET  
City-St-Zip: NORTH ATTLEBOROUGH, MA 02760 US

Title: MR. ( ) Delete  
Name: KEARNEY, DON T VP  
Address: 100 LOWDER STREET  
City-St-Zip: DEDHAM, MA 02062 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MR. (X) Change ( ) Addition  
Name: FRIGON, WALLACE L CEO  
Address: 169 CROMESSETT ROAD  
City-St-Zip: WAREHAM, MA 02571 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MARK A. JOHNSON

MGRM

01/15/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date