

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000158632

FILED  
May 04, 2007  
Secretary of State

Entity Name: CONTRACTOR'S BEST OF ORLANDO, INC.

## Current Principal Place of Business:

6349 NORTH ORANGE BLOSSOM TRL  
250  
ORLANDO, FL 32810 US

## New Principal Place of Business:

## Current Mailing Address:

6349 NORTH ORANGE BLOSSOM TRL  
250  
ORLANDO, FL 32810 US

## New Mailing Address:

FEI Number: 20-1906477

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SAPINSKI, THOMAS A  
1105 VALE ORCHARD LANE  
JACKSONVILLE, FL 32207 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P/T ( ) Delete  
Name: SAPINSKI, THOMAS A  
Address: 1105 VALE ORCHARD LANE  
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: VP/S ( ) Delete  
Name: PURO, CHIEN S  
Address: 2320 CADY WAY  
City-St-Zip: WINTER PARK, FL 32792 US

Title: VP ( ) Delete  
Name: MAN, EUGENE  
Address: 5359 ROYCE AVE  
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: D (X) Delete  
Name: STEIHNERN, NEIL  
Address: 3413 SOUTH SAXXON  
City-St-Zip: ST. AUGUSTINE, FL 32092 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: CHIEN PURO

VP

05/04/2007

Electronic Signature of Signing Officer or Director

Date