## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000171828

Title:

Name:

Address:

City-St-Zip:

CFO

HOOLEY, ALAN P

140 WESTMONTE DRIVE

(X) Delete

ALTAMONTE SPRINGS, FL 32714

FILED Jul 05, 2009 Secretary of State

Entity Name: CHICAGO SOUTH CONSTRUCTION, INC.						
Current Principal Place of Business:			New Principal Place of Business:			
	TWATER CRE DD, FL 32779	EK DRIVE EAST				
Current Mailing Address:			New Mailing Address:			
	TWATER CRE DD, FL 32779	EK DRIVE EAST				
FEI Number:	20-2058946	FEI Number Applied For ( )	FEI Number Not Appl	cable ( ) Certifica	te of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
		EK DRIVE EAST US				
The above in the State		ubmits this statement for the pu	ırpose of changing i	s registered office or re	egistered agent, or both,	
SIGNATUR	RE:					
Electronic Signature of Registered Agent			nt	Date		
		(2)(b), F.S., the corporation did not Trust Fund Contribution ( ).	receive the prior notic	<b>.</b>		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	HALE, GLENN H	TER CREEK DRIVE EAST	Title: Name: Address: City-St-Zip:	()Change(	) Addition	
Title: Name: Address: City-St-Zip:	P () WOJCIESZAK, A 6449 N. NEVA CHICAGO, IL 60	AVENUE	Title: Name: Address: City-St-Zip:	P (X) Change of WOJCIESZAK, ANN L 215 E. SWEETWATER CI LONGWOOD, FL 32779		
Title: Name: Address: City-St-Zip:	WOJCIESZAK, I 6449 N. NEVA A CHICAGO, IL 60	VENUE 0631	Title: Name: Address: City-St-Zip:	VP (X) Change (WOJCIESZAK, RICHARD 215 E. SWEETWATER CILONGWOOD, FL 32779	G REEK DRIVE	
Title: Name: Address: City-St-Zip:	VP () BURNETT, ROB 101 LITTLE WE LONGWOOD, F	KIVA COURT	Title: Name: Address: City-St-Zip:	EXVP (X) Change of CHECCHIO, MELISSA D 215 E.SWEETWATER CF LONGWOOD, FL 32779	· ·	

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: GLENN H HALE CEO 07/05/2009

() Change () Addition