## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000030454

City-St-Zip: PLANT CITY, FL 33563

Entity Name: CONTRACTOR'S NOTICING SERVICES, INC.

FILED Jun 19, 2007 Secretary of State

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Current P	rincipal Place of Busines	s:	New Principal Pl	New Principal Place of Business:	
304 E. BAKER ST. STE D				103 E. DR. MARTIN LUTHER KING BLVD. PLANT CITY, FL 33563	
PLANT CI	TY, FL 33563				
Current Mailing Address:			New Mailing Add	New Mailing Address:	
304 E. BAKER ST. STE. D PLANT CITY, FL 33563				103 E. DR. MARTIN LUTHER KING BLVD. PLANT CITY, FL 33563	
FEI Number	: 20-2309822 FEI Number	Applied For ( )	FEI Number Not Applicable (	) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Addre	Name and Address of New Registered Agent:	
RAINEY, DONNA 304 E. BAKER ST. STE D PLANT CITY, FL 33563 US				RAINEY, DONNA 103 E. DR. MARTIN LUTHER KING BLVD. PLANT CITY, FL 33563 US	
	named entity submits this see of Florida.	statement for the	purpose of changing its regis	tered office or registered agent, or both,	
SIGNATUI	RE: DONNA RAINEY			06/19/2007	
	Electronic Signature	of Registered Ag	ent	Date	
	ce with s. 607.193(2)(b), F.S., th mpaign Financing Trust Fund C		ot receive the prior notice.		
OFFICER	S AND DIRECTORS:		ADDITIONS/CHA	NGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	P ( ) Delete DURLAND, ANN P.O. BOX 2601 PLANT CITY, FL 33563		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete DURLAND, DAVID P.O. BOX 2601 PLANT CITY, FL 33563		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D (X) Delete CALHOUN, DEBRA P.O. BOX 2601 PLANT CITY, FL 33563		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete RAINEY, DONNA P.O. BOX 2601 PLANT CITY, FL 33563		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	D (X) Delete KENT, ANN 304 F. BAKER ST		Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE:	DONNA RAINEY	D	06/19/2007