


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**


DOCUMENT # P05000132006 1. Entity Name WALDRON CONTRACTING CO.	
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Principal Place of Business 620 SOUTH MAIN STREET LOT 64 LABELLE, FL 33935	Mailing Address POST OFFICE BOX 1522 LABELLE, FL 33975
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent WALDRON, RICHARD A SR 620 SOUTH MAIN ST, LOT 64 LABELLE, FL 33935

FILED
08 SEP -3 PM 12:53
**CLERK OF STATE
TALLAHASSEE, FLORIDA**



08192008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-3296083	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

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.	200135371522 09/04/08--01033--003 **150.00
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)</small>	DATE

FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD WALDRON, RICHARD A SR. 620 SOUTH MAIN STREET, LOT 64 LABELLE, FL 33935
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V WALDRON, BRADLEY D 620 SOUTH MAIN STREET, LOT 64 LABELLE, FL 33935
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**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: <u>Richard A. Waldron Sr.</u> 8/27/08 863-673-6362 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Us/Im Phone #</small>

9/3/08