

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000014204

FILED
Mar 25, 2009
Secretary of State

Entity Name: SIGNATURE SPECIALTY CONTRACTORS, INC

Current Principal Place of Business:

6772 WATERTON DR
RIVERVIEW, FL 33578

New Principal Place of Business:

Current Mailing Address:

6772 WATERTON DR
RIVERVIEW, FL 33578

New Mailing Address:

FEI Number: 20-4241791

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKEE, ELIZABETH
1718 E 7TH AVE, #301
TAMPA, FL 33605 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: P () Delete
Name: GIGANTE, MICHAEL
Address: 6772 WATERTON DR
City-St-Zip: RIVERVIEW, FL 33569

Title: VP () Delete
Name: SPIELDENNER, JOHN
Address: P.O. BOX 2771
City-St-Zip: RIVERVIEW, FL 33568

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GIGANTE, MICHAEL
Address: 6772 WATERTON DR
City-St-Zip: RIVERVIEW, FL 33578

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: MICHAEL GIGANTE

P

03/25/2009

Electronic Signature of Signing Officer or Director

Date