## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000018340

Entity Name: TRI-CORP CONSTRUCTORS, INC.

FILED Mar 29, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1612 JUNE AV BUILDING 1 SUITE 102 PANAMA CITY, FL 32405 13220 PANAMA CITY BEACH PARKWAY PANAMA CITY BEACH, FL 32407

Current Mailing Address:

New Mailing Address:

P.O. BOX 15535 PANAMA CITY, FL 32406 13220 PANAMA CITY BEACH PARKWAY PANAMA CITY BEACH, FL 32407

FEI Number: 26-1994550 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WLLIAMSON, ROBERT L JR 1612 JUNE AV BUILDING 1 SUITE 109 PANAMA CITY, FL 32405 US WLLIAMSON, ROBERT L JR 1612 JUNE AV BUILDING 1 SUITE 101 PANAMA CITY, FL 32405 US

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: 03/29/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: WILLIAMSON, ROBERT L JR.

Address: P.O. BOX 15535
City-St-Zip: PANAMA CITY, FL 32406

Title: ( ) Delete

Title: ( ) Delete Name:

Address: City-St-Zip: Title: CHCE (X) Change ( ) Addition Name: WILLIAMSON, ROBERT L JR.

Address: P.O. BOX 15535 City-St-Zip: PANAMA CITY, FL 32406

Title: PCOO ( ) Change (X) Addition

Name: LEE, WILLIAM D

Address: 13220 PANAMA CITY BEACH PARKWAY
City-St-Zip: PANAMA CITY BEACH, FL 32407

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: ROBERT L WILLIAMSON, JR CHCE 03/29/2009