

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18213

FILED  
Jan 09, 2012  
Secretary of State

**Entity Name:** PETERSON CONTRACTORS, INC.

**Current Principal Place of Business:**

104 BLACKHAWK  
REINBECK, IA 50669 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX A  
REINBECK, IA 506690155 US

**New Mailing Address:**

**FEI Number:** 42-0921654

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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

**OFFICERS AND DIRECTORS:**

Title: PTD  
Name: PETERSON, CORDELL Q.  
Address: 104 BLACKHAWK  
City-St-Zip: REINBECK, IA 50669

Title: VSD  
Name: PETERSON, GALE M JR  
Address: 104 BLACKHAWK  
City-St-Zip: REINBECK, IA 50669

Title: D  
Name: PETERSON, MARK  
Address: 104 BLACK HAWK  
City-St-Zip: REINBECK, IA 50669

Title: AS  
Name: DEHART, RON L  
Address: 104 BLACKHAWK ST  
City-St-Zip: REINBECK, IA 50669

Title: AT  
Name: LOCKHART, JENNIFER R  
Address: 104 BLACKHAWK ST  
City-St-Zip: REINBECK, IA 50669

I hereby 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 all other like empowered.

SIGNATURE: JENNIFER R LOCKHART

AT

01/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date