## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000013144

Entity Name: TRANSPORTATION CONTRACT SERVICES, INC.

FILED Apr 27, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

16117 A US 19N 17174 US HIGHWAY 19 NORTH CLEARWATER, FL 33764 CLEARWATER, FL 33764

**Current Mailing Address: New Mailing Address:** 

13825 ICOT BLVD. SUITE 613 16117 A US 19N CLEARWATER, FL 33764 CLEARWATER, FL 33760

FEI Number: 59-3199788 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GOLD, AARON J GOLD, AARON J 202 SOUTH ROME AVE. 703 SWANN AVE. TAMPA, FL 33606 US SUITE 100 TAMPA, FL 33606 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: 04/27/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition CAMBAS, NICHOLAS A CAMBAS, NICHOLAS A Name: Name: 16117 A US 19 N 13825 ICOT BLVD. SUITE 613 Address: Address: City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: CLEARWATER, FL 33760

Title: Title: (X) Change ( ) Addition () Delete WILLIAMS, GEORGE B SR. Name: Name: WILLIAMS, GEORGE B SR. 16117 A US 19 N Address: 17174 US HIGHWAY 19 NORTH Address:

CLEARWATER, FL 33764 CLEARWATER, FL 33764 City-St-Zip: 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: NICHOLAS A CAMBAS 04/27/2009 D