## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000024656

COSTAIN, TOM

14602 BLACK BEAR ROAD

PALM BEACH GARDENS, FL 33418 US

Name:

Address:

City-St-Zip:

Entity Name: COSTAIN CABLE CONSTRUCTION, INC.

FILED Apr 08, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 14602 BLACK BEAR ROAD PALM BEACH GARDENS, FL 33418 LIS **Current Mailing Address: New Mailing Address:** 14602 BLACK BEAR ROAD PALM BEACH GARDENS, FL 33418 US FEI Number: 65-0494840 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COSTAIN, TOM 14602 BLÁCK BEAR ROAD PALM BEACH GARDENS, FL 33418 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition COSTAIN, PENNY Name: Name: 14602 BLACK BEAR ROAD Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33418 US City-St-Zip: Title: Title: () Delete () Change () Addition Name: COSTAIN, MICHAEL Name: 15629 79TH CT. NORTH Address: Address: LOXAHATCHEE, FL 33470 US City-St-Zip: City-St-Zip: Title: Title: (X) Change ( ) Addition ( ) Delete COSTAIN, DWAYN COSTAIN, DWAYN Name: Name: 4810 129TH AVE. NORTH 15246 72ND COURT NORTH Address: Address: City-St-Zip: WEST PALM BEACH, FL 33411 US City-St-Zip: LOXAHATCHEE, FL 33470 US Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: PENNY COSTAIN VP 04/08/2009