

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 25, 2007 8:00 am**  
**Secretary of State**

04-25-2007 90182 019 \*\*\*150.00

DOCUMENT # P96000013065

1. Entity Name

UNIQUE CONTRACTORS, INC.



Principal Place of Business

2611-B WEST 23RD STREET  
PANAMA CITY FL 32405

Mailing Address

2611-B WEST 23RD STREET  
PANAMA CITY FL 32405



2. Principal Place of Business - No P.O. Box #

1701 Tennessee Av.

Suite, Apt. #, etc.

Suite 100

City & State

Lynn Haven, FL

Zip

32444

Country

USA

3. Mailing Address

1701 Tennessee Av.

Suite, Apt. #, etc.

Suite 100

City & State

Lynn Haven, FL

Zip

32444

Country

USA

1st MOORE

CR2E034 (10/06)

4. FEI Number

59-3362339

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

JENKINS, ERIC R  
2611-B WEST 23RD STREET  
PANAMA CITY FL 32405

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2007 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
JENKINS, ERIC R ☐ Delete  
STREET ADDRESS  
CITY - ST - ZIP  
2611-B WEST 23RD STREET  
PANAMA CITY FL 32405

TITLE  
NAME  
☐ Delete  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
☐ Delete  
STREET ADDRESS  
CITY - ST - ZIP

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STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
☐ Delete  
STREET ADDRESS  
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
1701 Tennessee Av Ste. 100 ☒ Change ☐ Addition  
STREET ADDRESS  
CITY - ST - ZIP  
Lynn Haven, FL 32444

TITLE  
NAME  
☐ Change ☐ Addition  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
☐ Change ☐ Addition  
STREET ADDRESS  
CITY - ST - ZIP

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TITLE  
NAME  
☐ Change ☐ Addition  
STREET ADDRESS  
CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Eric A. Jenkins*

Eric A. Jenkins, President 4/16/07 (850) 277-0411

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #