

## **2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P96000075862

**FILED**  
**Feb 07, 2008**  
**Secretary of State**

**Entity Name:** PRIME CONTRACTORS AND ASSOCIATES, INC.

**Current Principal Place of Business:**

1845 SAN MARCO ROAD  
303  
MARCO ISLAND, FL 34145

**New Principal Place of Business:**

**Current Mailing Address:**

888 ROSE COURT  
MARCO ISLAND, FL 34145

**New Mailing Address:**

**FEI Number:** 59-3405426

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BULLARD, J W  
121 NW THIRD STREET  
OCALA, FL 34475 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: PTSC ( ) Delete  
Name: SCHNEIDER, TODD E  
Address: 888 ROSE COURT  
City-St-Zip: MARCO ISLAND, FL 34145

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: GEATCHES, RENEE  
Address: 888 ROSE COURT  
City-St-Zip: MARCO ISLAND, FL 34145

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: TODD E. SCHNEIDER

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02/07/2008

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

\_\_\_\_\_  
Date