## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000100566

GIFFORD, DONALD R

LAKELAND, FL 33813

6576 CREWS LAKE CREST LOOP

Name:

Address:

City-St-Zip:

Entity Name: GIFFORD CONTRACTING, INC.

FILED Jun 15, 2009 Secretary of State

		3 0011110 1011110, 1110.		
Current P	rincipal Place	e of Business:	New Principal Place	of Business:
	WS LAKE CR D, FL 33813	EST LOOP US		
Current N	lailing Addre	ss:	New Mailing Addres	s:
P O BOX 2 LAKELAN	2572 D, FL 33806	US		
FEI Number	: 59-3485683	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	l Address of (	Current Registered Agent:	Name and Address	of New Registered Agent:
6576 CRE	, DONALD RC WS LAKE CR D, FL 33813			
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
SIGNATUI	RE:			
	Electro	nic Signature of Registered Ag	ent	Date
		3(2)(b), F.S., the corporation did no	ot receive the prior notice.	
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	GIFFORD, DO	LAKE CREST LOOP	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	GIFFORD, TIN	LAKE CREST LOOP	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	GIFFORD, TIN	LAKE CREST LOOP	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title:	Т (	) 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:	DONALD R. GIFFORD	PRES	06/15/2009