

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000074712

FILED
Jan 21, 2009
Secretary of State

Entity Name: TRENCH SHORING SERVICES OF JACKSONVILLE, INC.

Current Principal Place of Business:

2515 N EDGWOOD AVE
JACKSONVILLE, FL 32254

New Principal Place of Business:

Current Mailing Address:

6770 E 56TH AVE
COMMERCE CITY, CO 80022

New Mailing Address:

FEI Number: 58-3490952

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPENCER, PAT
481 THORPE RD
ORLANDO, FL 32824 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SPENCER, DENNIS I
Address: 6770 E 56TH AVE
City-St-Zip: COMMERCE CITY, CO 80022

Title: S () Delete
Name: SPENCER, PAT
Address: 481 THORPE RD
City-St-Zip: ORLANDO, FL 32824

Title: V () Delete
Name: LAMBERSON, KEITH
Address: 4745 BAKERS FERRY RD
City-St-Zip: ATLANTA, GA 30336

Title: T () Delete
Name: HAIDER, LARRY A
Address: 5371 MAGNOLIA ST
City-St-Zip: COMMERCE CITY, CO 80022

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
Name:
Address:
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: LARRY HAIDER

TREA

01/21/2009

Electronic Signature of Signing Officer or Director

Date