


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 29, 2008 08:00 AM**  
**Secretary of State**

|  |   |
|--|---|
| <b>DOCUMENT # S41978</b>                           |  |
| 1. Entity Name<br><b>CONTRACT ASSEMBLIES, INC.</b> |   |

|   |   |
|---|---|
| Principal Place of Business<br><b>110 3RD STREET SW<br/>HAVANA, FL 32333 US</b> | Mailing Address<br><b>P.O. BOX 1228<br/>HAVANA, FL 32333 US</b> |
|---|---|

DO NOT WRITE IN THIS SPACE



04252008 No Chg-P CR2E034 (11/05)

|   |  |
|---|--|
| 4. FEI Number<br><b>59-3079231</b>                        | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$8.75</b> Additional Fee Required                  |

|  |
|--|
| 6. Name and Address of Current Registered Agent<br><br><b>SPAHN, RICHARD<br/>12700 SW 112TH ST. RD<br/>DUNNELLON, FL 34432</b> |
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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 _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | DATE _____ |
|--|------------|

|   |   |                                  |
|---|---|----------------------------------|
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2008 Fee will be \$550.00</b> | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be<br>Added to Fees | <b>05/22/08-80003-011 150.00</b> |
|---|---|----------------------------------|

| 10. OFFICERS AND DIRECTORS                     |  |
|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>ROBERT, WHITE<br>11944 R. HARVARD AVE.<br>AURORA, CO    |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | STD<br>WHITE, DONLAD<br>3660 QUINCY PLACE<br>GAINESVILLE, GA |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | PD<br>WHITE, LOUISE<br>3660 QUNICY PLACE<br>GAINESVILLE, GA  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>SNYDER, JEFF<br>75 ASHBOW TRAIL<br>HAVANA, FL           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Donald A. White</u> <b>DONALD A. WHITE</b> <u>4/25/08</u> <u>678-267-2252</u> | Date | Daytime Phone # |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>           |      |                 |