2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V07851

FILED May 07, 2009 Secretary of State

Entity Name: FLORIDA DEVELOPERS/GENERAL CONTRACTORS, INC.

Current Principal Place of Business:		New Principal Place of Business:		
2ND FLOO	REVARD STRE DR SSEE, FL 323			
Current Mailing Address:		New Mailing Address:		
2ND FLO	REVARD STRE DR SSEE, FL 323			
El Number	: 59-3102224	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of C	Current Registered Agent:	Name and Address o	f New Registered Agent:
1511 JOÉ	DOROTHY W LOUIS STREE SSEE, FL 323			
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	,	submits this statement for the	ourpose of changing its registered	d office or registered agent, or both,
	named entity e of Florida	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,
n the Stat	named entity e of Florida. RE:	submits this statement for the particular sta		d office or registered agent, or both, Date
n the Stat SIGNATU n accordan	e named entity : e of Florida. RE: Electror ice with s. 607.19	nic Signature of Registered Ag 3(2)(b), F.S., the corporation did no	ent	
n the Stat SIGNATU n accordan Election Ca	e named entity : e of Florida. RE: Electror ice with s. 607.19	nic Signature of Registered Ag 3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ent ot receive the prior notice.	
n the Stat SIGNATU n accordan Election Ca	e named entity : e of Florida. RE: Electror ice with s. 607.19 mpaign Financin	nic Signature of Registered Ag 3(2)(b), F.S., the corporation did no g Trust Fund Contribution (). TORS:) Delete S E COURT EAST	ent ot receive the prior notice.	Date
n the Stati SIGNATU In accordant Election Can DFFICER Vitle: Name: Address:	e named entity : e of Florida. RE: Electror ace with s. 607.19 mpaign Financing S AND DIREC DP MCROY, JAME 1160 CORBY C TALLAHASSEE	nic Signature of Registered Ag 3(2)(b), F.S., the corporation did no g Trust Fund Contribution (). TORS:) Delete S E COURT EAST i, FL) Delete OTHY W IS STREET	ent ot receive the prior notice. ADDITIONS/CHANGE Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

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.