

# **2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# V60160

**FILED**  
**Mar 05, 2010**  
**Secretary of State**

**Entity Name:** ISLANDS MECHANICAL CONTRACTOR, INC.

**Current Principal Place of Business:**

3070 BLANDING BOULEVARD  
MIDDLEBURG, FL 32068

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2039  
MIDDLEBURG, FL 32050

**New Mailing Address:**

**FEI Number:** 59-3144925

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CONTEGA BUSINESS SERVICES, LLC  
ONE INDEPENDENT DRIVE  
SUITE 1200  
JACKSONVILLE, FL 32202 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: DPT  
Name: CHASON, RONALD E  
Address: 3070 BLANDING BOULEVARD  
City-St-Zip: MIDDLEBURG, FL 32068

Title: DVS  
Name: TURNAGE, ROBERT J  
Address: 3070 BLANDING BOULEVARD  
City-St-Zip: MIDDLEBURG, FL 32068

I hereby 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 all other like empowered.

SIGNATURE: RONALD E. CHASON

DPT

03/05/2010

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

\_\_\_\_\_  
Date