

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003964

FILED
Jan 15, 2009
Secretary of State

Entity Name: K. BLEVINS CONTRACTING, INC.

Current Principal Place of Business:

343 SALEM GATE DR., SE, STE 203
CONYERS, GA 30013

New Principal Place of Business:

343 SALEM GATE DR., SE
SUITE 203
CONYERS, GA 30013

Current Mailing Address:

343 SALEM GATE DR., SE, STE 203
CONYERS, GA 30013

New Mailing Address:

343 SALEM GATE DR., SE
SUITE 203
CONYERS, GA 30013

FEI Number: 58-1997245

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR., SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR.
SUITE 4
WESTON, FL 33331 US

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:

01/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BLEVINS, KEN
Address: 343 SALEM GATE DR., SE, STE 203
City-St-Zip: CONYERS, GA 30013

Title: S () Delete
Name: BLEVINS, TRACIE
Address: 343 SALEM GATE DR., SE, STE 203
City-St-Zip: CONYERS, GA 30013

Title: VP () Delete
Name: DISOTELL, JENNIFER
Address: 343 SALEM GATE DR. SE, STE 203
City-St-Zip: CONYERS, GA 30013

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:

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: KEN BLEVINS

P

01/15/2009

Electronic Signature of Signing Officer or Director

Date