


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 09, 2008 8:00 am**  
**Secretary of State**

04-09-2008 90027 044 \*\*\*158.75

**DOCUMENT # 474157**  
 1. Entity Name  
**A. RANDY'S ELECTRIC, INC.**



Principal Place of Business 3798 131ST AVENUE NORTH CLEARWATER, FL 33762	Mailing Address P. O. BOX 42577 ST. PETERSBURG, FL 33742
--	--

40006101



01032008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-1589049</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**  
 SPITZER, CHARLES E  
 6523 2ND AVE SOUTH  
 SAINT PETERSBURG, FL 33707

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SPITZER, CHARLES E 6523 2 AVE S ST PETERSBURG, FL 33707
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SEXTON, TERRILL L 9650 68TH ST N PINELLAS PARK, FL 33782
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ENGLISH, JENNY L 9236 RUSTIC PINES BLVD W SEMINOLE, FL 33776
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AV CALVERT, JASON K 304 EVELYN STREET CLEARWATER, FL 33765
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP HEISEY, RUSSELL G. 6980 ULMERTON ROAD, #1-C LARGO, FL 33771
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FLANNERY, KEVIN M. 2580 64th PLACE NORTH ST. PETERSBURG, FL 33702

**DO NOT WRITE IN THIS SPACE**

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:** *Charles E. Spitzer* CHARLES E. SPITZER 3/21/08 727/573-1400  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

11. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>CORPORATE OFFICERS CONTINUED</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>A. RANDY'S ELECTRIC, INC. 2008</b>	1.2 NAME	<b>ATTACHMENT</b>
STREET ADDRESS	<b>DOCUMENT #474157</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	<b>AVP</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ENGLISH, RAYMOND L.</b>	2.2 NAME	<b>40062781</b>
STREET ADDRESS	<b>9236 RUSTIC PINES BLVD. W.</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>SEMINOLE, FL 33776</b>	2.4 CITY-ST-ZIP	
TITLE	<b>AVP</b> <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>KIMES, ROBERT L.</b>	3.2 NAME	
STREET ADDRESS	<b>1700 54th AVENUE NORTH</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>ST. PETERSBURG, FL 33714</b>	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	<b>AVP</b>
STREET ADDRESS		4.3 STREET ADDRESS	<b>MOORE, ROBERT</b>
CITY-ST-ZIP		4.4 CITY-ST-ZIP	<b>2020 STATE ROAD 60 EAST</b>
TITLE	<b>AVP</b> <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MILLER, STUART T.</b>	5.2 NAME	
STREET ADDRESS	<b>6383 30th WAY NORTH</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP	<b>ST. PETERSBURG, FL 33702</b>	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	<b>AVP</b>
STREET ADDRESS		6.3 STREET ADDRESS	<b>SHANNON, J. FRANK</b>
CITY-ST-ZIP		6.4 CITY-ST-ZIP	<b>4057 COX DRIVE</b>
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>AVP</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>THORNTON, THOMAS</b>	1.2 NAME	
STREET ADDRESS	<b>2525 HOLLYHOCK COURT</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>CLEARWATER, FL 33771</b>	1.4 CITY-ST-ZIP	
TITLE	<b>AVP</b> <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>WAPPLER, FREDERICK H.</b>	2.2 NAME	
STREET ADDRESS	<b>1775 MASSACHUSETTS AVENUE N.E.</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>ST. PETERSBURG, FL 33703</b>	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	

CR2E034 (9/96)

CR2E034 (9/96)

CR2E034 (9/96)