

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 04, 2007 8:00 am
Secretary of State

04-04-2007 90185 048 ***150.00



DOCUMENT # 607280

1. Entity Name
 VAN'S ELECTRIC, INC.

Principal Place of Business
 430 NORTH G STREET
 LAKE WORTH FL 33460

Mailing Address
 430 NORTH G STREET
 LAKE WORTH FL 33460



1st MOORE CR2E034 (10/06)

2. Principal Place of Business - No P.O. Box #
 3599 23rd Ave S

3. Mailing Address
 3599 23rd Ave South

Suite, Apt. #, etc.
 Suite 1

Suite, Apt. #, etc.
 Suite 1

City & State
 Lake Worth FL

City & State
 Lake Worth FL

4. FEI Number 59-1884047

Applied For
 Not Applicable

Zip
 33460

Country
 Palm Beach

Zip
 33460

Country
 Palm Beach

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VANDER WOUDE, JAMES A
 316 ORANGE TREE DRIVE
 ATLANTIS FL 33462

Name
 Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	ED	<input type="checkbox"/> Delete
NAME	VANDER WOUDE, JAMES A	
STREET ADDRESS	316 ORANGE TREE DR.	
CITY-STATE-ZIP	ATLANTIS FL 33462	
TITLE	ED	<input checked="" type="checkbox"/> Delete
NAME	VANDERWOUDE, JAMES A	
STREET ADDRESS	316 ORANGE TREE DR.	
CITY-STATE-ZIP	LAKE WORTH FL 33462	
TITLE	VanderWoude, Scott	<input type="checkbox"/> Delete
NAME	1329 Carribbean Way	
STREET ADDRESS	Lantana, FL 33462	
CITY-STATE-ZIP		
TITLE	VanderWoude, Christopher	<input type="checkbox"/> Delete
NAME	316 Orange Tree Dr Apt B	
STREET ADDRESS	Atlantis, FL 33462	
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE	VP, T, S, Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VanderWoude, Scott	
STREET ADDRESS	1329 Carribbean Way	
CITY-STATE-ZIP	Lantana, FL 33462	
TITLE	President, Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VanderWoude, Christopher	
STREET ADDRESS	316 Orange Tree Dr Apt B	
CITY-STATE-ZIP	Atlantis, FL 33462	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 507, 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: James VanderWoude PR 3-6-07 (561) 762-7170
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #