## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000006308

City-St-Zip:

PISCATAWAY, NJ 08854

FILED Sep 14, 2005 Secretary of State

Entity Nar	ne: GAFFNI	EY-KROESE ELECTRICAL SU	PPLY CORP.		
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
	BRIDGE ROA VAY, NJ 088				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	BRIDGE ROA VAY, NJ 088				
FEI Number:	: 13-5525936	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
SISSON, LARRY 218 SOUTH COUNTRY LANE QUINCY, FL 32351 US			92 SADBERRY ROAD		
The above in the State	named entity e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE: PAULS	MITH V.P		09/14/2005	
	Electro	onic Signature of Registered Ag	ent	Date	
		93(2)(b), F.S., the corporation did n ng Trust Fund Contribution ( ).	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	,		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VD ( KROESE, JOI 60 KINGSBRI PISCATAWAY	DGE ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	D ( KROESE, JOI 60 KINGSBRI		Title: Name: Address:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: JOHN S KROESE III VD09/14/2005