

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000040490

FILED
Feb 08, 2009
Secretary of State

Entity Name: KING DOME ELECTRIC MAINTENANCE & REPAIR, INC.

Current Principal Place of Business:

10 REPUBLIC DR.
NAPLES, FL 34112

New Principal Place of Business:

10 REPUBLIC DRIVE
NAPLES, FL 34112

Current Mailing Address:

10 REPUBLIC DR.
NAPLES, FL 34112

New Mailing Address:

10 REPUBLIC DRIVE
NAPLES, FL 34112

FEI Number: 54-2104782

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLAMONDON, ROBERTA
10 REPUBLIC DR.
NAPLES, FL 34112 US

Name and Address of New Registered Agent:

PLAMONDON, ROBERTA M
10 REPUBLIC DRIVE
NAPLES, FL 34112 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: ROBERTA PLAMODNON

02/08/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: PLAMONDON, ROBERTA
Address: 10 REPUBLIC DR.
City-St-Zip: NAPLES, FL 34112

Title: VD () Delete
Name: LEITER, CRYSTAL
Address: 10 REPUBLIC DR.
City-St-Zip: NAPLES, FL 34112

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PLAMONDON, ROBERTA M
Address: 10 REPUBLIC DR.
City-St-Zip: NAPLES, FL 34112

Title: D (X) Change () Addition
Name: LEITER, CRYSTAL L
Address: 10 REPUBLIC DR.
City-St-Zip: NAPLES, FL 34112

Title: VP () Change (X) Addition
Name: WILLIAMS, JOHN R
Address: 10 REPUBLIC DRIVE
City-St-Zip: NAPLES, FL 34112 US

Title: S () Change (X) Addition
Name: LOPEZ, MINDI L
Address: 10 REPUBLIC DR
City-St-Zip: NAPLES, FL 34112 US

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: ROBERTA M PLAMONDON

P

02/08/2009

Electronic Signature of Signing Officer or Director

Date