


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 21, 2007 08:00 AM
Secretary of State

DOCUMENT # P95000090580
1. Entity Name
BURNS ELECTRIC SERVICE, INCORPORATED



Principal Place of Business Mailing Address
7699 COUNTY ROAD 133 7699 COUNTY ROAD 133
WILDWOOD, FL 34785 WILDWOOD, FL 34785

DO NOT WRITE IN THIS SPACE



02192007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3350842 Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BURNS, RICHARD N
7699 C.R. 133
WILDWOOD, FL 34785

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	BURNS, NEIL R
STREET ADDRESS	7699 COUNTY ROAD 133
CITY-ST-ZIP	WILDWOOD, FL 34785
TITLE	S
NAME	ABALANALP, JOSHUA
STREET ADDRESS	7609 CR 133
CITY-ST-ZIP	WILDWOOD, FL 34785
TITLE	V-P
NAME	BURNS, DAVID K
STREET ADDRESS	4019 CR 102
CITY-ST-ZIP	OXFORD, FL 34484
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/29/07-80084-012 158.75

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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: *Richard Neil Burns*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-1-07
Date Daytime Phone #