

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 648024

FILED
Apr 13, 2009
Secretary of State

Entity Name: GENERAL ECLECTIC, INC.

Current Principal Place of Business:

1066 N CO HWY 395
P O BOX 4772
SANTA ROSA BCH, FL 32459 US

New Principal Place of Business:

1066 N CO HWY 395
SANTA ROSA BCH, FL 32459 US

Current Mailing Address:

PO BOX 4772
P.O. BOX 4772
SEASIDE, FL 32459 US

New Mailing Address:

PO BOX 4772
SEASIDE, FL 32459 US

FEI Number: 59-1965062

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TROXEL, CHERYL
1066 N CO HWY 395
P O BOX 4772
SANTA ROSA BCH, FL 32459 US

Name and Address of New Registered Agent:

TROXEL, CHERYL A PRES.
1066 N CO HWY 395
SANTA ROSA BCH, FL 32459 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: CHERYL A. TROXEL

04/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TROXEL, CHERYL
Address: 1066 N CO HWY 395
City-St-Zip: SANTA ROSA BCH, FL 32459

Title: DTSV () Delete
Name: NABLO, JEFFREY L.
Address: 1066 N CO HWY 395
City-St-Zip: SANTA ROSA BCH, FL 32459

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: TROXEL, CHERYL A PRES.T.
Address: 1066 N CO HWY 395
City-St-Zip: SANTA ROSA BCH, FL 32459

Title: DTSV (X) Change () Addition
Name: NABLO, JEFFREY L V.P. S.
Address: 1066 N CO HWY 395
City-St-Zip: SANTA ROSA BCH, FL 32459

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: JEFFREY L. NABLO

V.P.

04/13/2009

Electronic Signature of Signing Officer or Director

Date