2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 387477

Entity Name: CLAY ELECTRIC SERVICES, INC.

Current Principal Place of Business:

225 WEST WALKER DRIVE KEYSTONE HEIGHTS, FL 32656

Current Mailing Address:

P.O. BOX 308 KEYSTONE HEIGHTS, FL 32656 US

FEI Number: 59-1613094

Name and Address of Current Registered Agent:

DAVIS, RICHARD KCEO 225 W. WALKER DR KEYSTONE HEIGHTS, FL 32656 US

Date

Certificate of Status Desired: Yes

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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	TREASURER, DIRECTOR	Title	DIRECTOR
Name	REEVES, SUSAN S	Name	SMITH, KELLEY RJR
Address	12028 HWY 301 SOUTH	Address	1520 HWY 17 NORTH
City-State-Zip:	HAWTHORNE FL 32640	City-State-Zip:	BOSTWICK FL 32007
Title	DIRECTOR	Title	DIRECTOR
Name	HASTINGS, KAREN	Name	WILSON, JIMMY
Address	17188 NE 45TH AVE RD	Address	1881 LONGBAY ROAD
City-State-Zip:	CITRA FL 32113	City-State-Zip:	MIDDLEBURG FL 32068
Title	DIRECTOR	Title	CEO
Title Name	DIRECTOR MALPHURS, J C	Title Name	CEO DAVIS, RICHARD K
Name	MALPHURS, J C 16808 NW 262ND AVE	Name	DAVIS, RICHARD K
Name Address	MALPHURS, J C 16808 NW 262ND AVE	Name Address	DAVIS, RICHARD K 3243 FIRESIDE DRIVE
Name Address City-State-Zip:	MALPHURS, J C 16808 NW 262ND AVE ALACHUA FL 32615	Name Address City-State-Zip:	DAVIS, RICHARD K 3243 FIRESIDE DRIVE MIDDLEBURG FL 32068
Name Address City-State-Zip: Title	MALPHURS, J C 16808 NW 262ND AVE ALACHUA FL 32615 SECRETARY, DIRECTOR	Name Address City-State-Zip: Title	DAVIS, RICHARD K 3243 FIRESIDE DRIVE MIDDLEBURG FL 32068 DIRECTOR
Name Address City-State-Zip: Title Name	MALPHURS, J C 16808 NW 262ND AVE ALACHUA FL 32615 SECRETARY, DIRECTOR HAGGLUND, CARL F 6778 WOMENS CLUB ROAD	Name Address City-State-Zip: Title Name	DAVIS, RICHARD K 3243 FIRESIDE DRIVE MIDDLEBURG FL 32068 DIRECTOR HERSEY, DEWITT

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I hereby 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 all other like empowered.

SIGNATURE: RICHARD K DAVIS

CEO

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail Continued :

Title	VP, DIRECTOR	Title	PRESIDENT, DIRECTOR
Name	WHITEHEAD, JOHN H	Name	SMITH, JO ANN
Address	10320 NE 207TH LANE	Address	16115 NW HWY 320
City-State-Zip:	LAKE BUTLER FL 32054	City-State-Zip:	MICANOPY FL 32667