2018 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 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

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

Electronic Signature of Registered Agent

Date

FILED Apr 24, 2018

Secretary of State

CC1446655198

Officer/Director Detail:

Title SECRETARY, DIRECTOR Title DIRECTOR

NameREEVES, SUSAN SNameSMITH, KELLEY RJRAddress12028 HWY 301 SOUTHAddress1520 HWY 17 NORTHCity-State-Zip:HAWTHORNE FL 32640City-State-Zip:BOSTWICK FL 32007

Title DIRECTOR Title DIRECTOR, TREASURER

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

NameMALPHURS, J CNameDAVIS, RICHARD KAddress16808 NW 262ND AVEAddress3243 FIRESIDE DRIVECity-State-Zip:ALACHUA FL 32615City-State-Zip:MIDDLEBURG FL 32068

Title DIRECTOR, VP Title DIRECTOR

NameHAGGLUND, CARL FNameHERSEY, DEWITTAddress6778 WOMENS CLUB ROADAddress7372 SE 11TH AVENUE

City-State-Zip: KEYSTONE HEIGHTS FL 32656 City-State-Zip: STARKE FL 32091

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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 04/24/2018

Officer/Director Detail Continued:

Title DIRECTOR, PRESIDENT 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