

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000000578

**Entity Name:** ERNEST P. BREAUX ELECTRICAL, INC.

**Current Principal Place of Business:**

2812 BROKEN ARROW RD  
NEW IBERIA, LA 70560

**Current Mailing Address:**

PO BOX 11640  
NEW IBERIA, LA 70562-1640

**FEI Number:** 20-2923461

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**Officer/Director Detail :**

Title            CEO  
Name            BREAUX, PHILIP B  
Address        2812 BROKEN ARROW RD  
City-State-Zip: NEW IBERIA LA 70560

Title            DVP  
Name            BELL, DAVID  
Address        2812 BROKEN ARROW RD  
City-State-Zip: NEW IBERIA LA 70560

Title            CFO  
Name            MENARD, ROBIN  
Address        2812 BROKEN ARROW RD  
City-State-Zip: NEW IBERIA LA 70560

Title            DVP  
Name            BYROM, JOHN PJR  
Address        2812 BROKEN ARROW RD  
City-State-Zip: NEW IBERIA LA 70560

Title            S  
Name            CHAMPAGNE, BETH L  
Address        2812 BROKEN ARROW RD  
City-State-Zip: NEW IBERIA LA 70560

*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:** ROBIN B MENARD

**CFO**

**04/23/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date