

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 309571

FILED
Jan 19, 2009
Secretary of State

Entity Name: CURREN ELECTRIC COMPANY

Current Principal Place of Business:

3859 N. HWY 441
OKEECHOBEE, FL 34972

New Principal Place of Business:

Current Mailing Address:

3859 N. HWY 441
OKEECHOBEE, FL 34972

New Mailing Address:

FEI Number: 59-1154409

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CURREN, WILLIAM S
3859 HWY 441 NORTH
OKEECHOBEE, FL 34972 US

Name and Address of New Registered Agent:

CURREN, WILLIAM S PRES
3859 HWY 441 NORTH
OKEECHOBEE, FL 34972 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: WILLIAM S. CURREN

01/19/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: CURREN, SABA R
Address: 3859 HWY 441 NORTH
City-St-Zip: OKEECHOBEE, FL 34972

Title: PD () Delete
Name: CURREN, WILLIAM S
Address: 3859 HWY 441 NORTH
City-St-Zip: OKEECHOBEE, FL 34972

Title: ST () Delete
Name: CURREN, SUSAN
Address: 3859 HWY 441 NORTH
City-St-Zip: OKEECHOBEE, FL 34972

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: CURREN, SABA R VP
Address: 3859 HWY 441 NORTH
City-St-Zip: OKEECHOBEE, FL 34972

Title: PD (X) Change () Addition
Name: CURREN, WILLIAM S PRES
Address: 3859 HWY 441 NORTH
City-St-Zip: OKEECHOBEE, FL 34972

Title: ST (X) Change () Addition
Name: CURREN, SUSAN A ST
Address: 3859 HWY 441 NORTH
City-St-Zip: OKEECHOBEE, FL 34972 US

Title: T () Change (X) Addition
Name: CURREN, SUSAN A T
Address: 3859 HWY 441 NORTH
City-St-Zip: OKEECHOBEE, FL 34972 US

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: WILLIAM S. CURREN

PRES

01/19/2009

Electronic Signature of Signing Officer or Director

Date