

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 394734

FILED
Mar 19, 2009
Secretary of State

Entity Name: AAA ELECTRICAL CONTRACTORS, INC.

Current Principal Place of Business:

6636 INDUSTRIAL AVE.
PORT RICHEY, FL 34668

New Principal Place of Business:

Current Mailing Address:

6636 INDUSTRIAL AVE.
PORT RICHEY, FL 34668

New Mailing Address:

FEI Number: 59-1378416

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, DENNIS
17824 CRAWLEY ROAD
ODESSA, FL 33556 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: BROWN, DENNIS
Address: 17824 CRAWLEY ROAD
City-St-Zip: ODESSA, FL 33556

Title: VD () Delete
Name: BROWN, TYSON K
Address: 15350 AMBERLY DR. APT 411
City-St-Zip: TAMPA, FL 33647

Title: VP () Delete
Name: KELLY, JAMES N
Address: 5413 TROPICAL WOODS CT.
City-St-Zip: PORT RICHEY, FL 34668

Title: D () Delete
Name: BROWN, CHERYL
Address: 17824 CRAWLEY ROAD
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: BROWN, TYSON K
Address: 3554 PICKERELL PLACE
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DENNIS BROWN

PSD

03/19/2009

Electronic Signature of Signing Officer or Director

Date