

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 01, 2004 8:00 am
Secretary of State

04-01-2004 90029 028 ***158.75

DOCUMENT # 406012
 1. Entity Name
DAN ROGERS ELECTRIC, INC.



Principal Place of Business
 10501 SOUTHERN BLVD
 ROYAL PALM BEACH FL 33411
 US

Mailing Address
 PO BOX 210005
 W PALM BEACH FL 33421-0005
 US



MOORE CR2E034 (11/03)

2. Principal Place of Business
 220 Las Palmas St.
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 Royal Palm Beach, Fl

City & State

Zip Country
 33411 Palm Beach

4. FEI Number 59-1421772
 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 ROGERS, DANIEL D.
 581-105TH AVE., NO.
 WEST PALM BEACH FL 33411

7. Name and Address of New Registered Agent
 Name
 Rogers, Daniel D.
 Street Address (P.O. Box Number is Not Acceptable)
 2105 SW 14th PLACE
 City Boynton Beach FL Zip Code 33426

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Rogers, Daniel D. - Director Daniel D. Rogers 3/26/04
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when registering) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ROGERS, PATRICIA H 581 105TH AVENUE NORTH ROYAL PALM BEACH FL <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MCVEIGH, DANIEL W 581 105TH AVENUE NORTH ROYAL PALM BEACH FL <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROGERS, DIANE M 581 105TH AVENUE NORTH ROYAL PALM BEACH FL <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Rogers, Patricia H. 2105 SW 14th Place Boynton Beach, FL 33426 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Rogers, Daniel 10090 Patience Ln. Royal Palm Beach, FL 33411 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Rogers, Diane M 220 Las Palmas St. Royal Palm Beach, FL 33411 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Rogers, Daniel D 2105 SW 14th Place Boynton Beach, FL 33426 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Daniel D. Rogers Daniel D. Rogers 3/26/04 561-369-7940
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #