## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 441396**

Entity Name: ENERGY ELECTRIC, INC

ALLEN, KATHIÉ J

TAMPA, FL 33556

16637 PATTERSON RD

Name:

Address:

City-St-Zip:

FILED Apr 27, 2007 Secretary of State

Littly Na	ille. LINERO	ELECTRIC, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
8112 NORTH NINTH STREET P O BOX 8125 TAMPA, FL 33604			8112 NORTH NINTH STREET TAMPA, FL 33604		
Current N	Mailing Addre	ss:	New Mailing Address:		
8112 NOR P O BOX ( TAMPA, F		REET			
FEI Number	r: 59-1689769	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
STE B	DONALD ICITY CENTEF ' CENTER, FL				
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	SANFORD, GL	ANDS BLVD, #58	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SANFORD, CH	ANDS BLVD, #58	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VSD ( ARNOLD, LILL 8311 REGINA TAMPA, FL 33	PLACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	V (X	') Delete	Title:	( ) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: CHARLES R. SANFORD PD 04/27/2007