2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2005 8:00 am
Secretary of State
02-03-2005 90049 005 ***158.75

DOCUMENT # 510474

1. Entity Name
ROBERT J. MULROY ELECTRICAL CONTRACTOR, INC.

Principal Place of Business	Mailing Address
1050 SW 24TH AVENUE POSTOFFICE BOX 1525 BOYNTON BEACH, FL 33425	1050 SW 24TH AVENUE POSTOFFICE BOX 1525 BOYNTON BEACH, FL 33425

50010296

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

01052005 Chg-P CR2E034 (10/03)

4. FEI Number 59-1683262 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MULROY, ROBERT J.
1050 SW 24TH AVENUE
BOYNTON BEACH, FL 33426

7. Name and Address of New Registered Agent

Name DION P. DUNN
Street Address (P.O. Box Number is Not Acceptable) 130 SE 5th AVENUE
City BOYNTOW BEACH FL Zip Code 33435

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 [signature] DION P. DUNN 1/24/2005
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MULROY, ROBERT J. 1050 SW 24TH AVENUE BOYNTON BEACH, FL ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT MULROY, ROBERT J 1050 SW 24th AVENUE BOYNTOW BEACH, FL 33426 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DUNN, DION P 130 S.E. 5TH AVE BOYNTON BEACH, FL 33435 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT DUNN, DION P 130 SE 5th AVENUE BOYNTOW BEACH, FL 33435 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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: [signature] President Robert J Mulroy 1/24/2005 5617321562
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #