## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 542606** 

Entity Name: EDWARDS ELECTRICAL ENTERPRISES, INC.

FILED Jan 07, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1395 NORTH KILLIAN DR. 1395 NORTH KILLIAN DR. LAKE PARK, FL 33403

BAY#6

LAKE PARK, FL 33403

**Current Mailing Address: New Mailing Address:** 

1395 NORTH KILLIAN DR. 1395 NORTH KILLIAN DR. LAKE PARK, FL 33403 BAY#6

LAKE PARK, FL 33403

FEI Number: 59-1765772 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:

GORMAN, DAVID L 618 US HIGHWAY ONE, SUITE 303 NORTH PALM BEACH, FL 33408 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition EDWARDS, NANCY H., EDWARDS, NANCY H., Name: Name: Address:

2555 SUN COVE LANE 2555 SUN COVE LANE Address: City-St-Zip: NO. PALM BEACH, FL City-St-Zip: NO. PALM BEACH, FL 33410 US

Title: VD Title: VD (X) Change ( ) Addition () Delete EDWARDS, ANTONELLA Name: Name: EDWARDS, ANTONELLA

2615 SUN COVE LN 2615 SUN COVE LN Address: Address:

NORTH PALM BEACH, FL 33410 NORTH PALM BEACH, FL 33410 US City-St-Zip: City-St-Zip:

Title: Title: PD ( ) Delete () Change () Addition EDWARDS, STEPHEN F., Name: Name:

2615 SUN COVE LANE Address: Address: City-St-Zip: NO. PALM BEACH, FL 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: ANTONELLA EDWARDS **VPD** 01/07/2008