

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 677934

Entity Name: REEVES ELECTRIC, INC.

FILED
Mar 11, 2009
Secretary of State

Current Principal Place of Business:

4410 SE 95 STREET
OCALA, FL 34480 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 2288
BELLEVIEW, FL 34421 US

New Mailing Address:

FEI Number: 59-2017000

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAYNARD, GROVER L
1025 SE 170 ST.
SUMMERFIELD, FL 34491 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: P () Delete
Name: MAYNARD, GROVER L
Address: 1025 SE 170 ST.
City-St-Zip: SUMMERFIELD, FL 34491

Title: VP () Delete
Name: MAYNARD, JOANN
Address: 1025 SE 170 ST
City-St-Zip: SUMMERFIELD, FL 34491

Title: ST () Delete
Name: HAMES, LINDA
Address: 12681 SE 54 AVE.
City-St-Zip: BELLEVIEW, FL 34420

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: LINDA HAMES

ST

03/11/2009

Electronic Signature of Signing Officer or Director

Date