

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 20, 2004 08:00 AM
Secretary of State

DOCUMENT # 684503

1. Entity Name
ELECTRICAL DESIGN AND ENGINEERING, INC.



Principal Place of Business
**2096 EAST BOND DRIVE
WEST PALM BEACH, FL 33415-7022**

Mailing Address
**1167 CRICKETT LANE
CENTRALIA, IL 62801**

DO NOT WRITE IN THIS SPACE



07092004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2026508

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**FEARRINGTON, WILLA A, ESQ
515 NORTH FLAGLER DRIVE, STE 600
WEST PALM BEACH, FL 33401**

**DO NOT WRITE
IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when requesting)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

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
**DP
DAVIS, ROBERT A
2096 E BOND DR
W PALM BEACH, FL 00000,**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**ST
DAVIS, GLORIA
2096 EAST BOND DRIVE
WEST PALM BEACH, FL00000,**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**DV
COBURN, RICHARD E
RT 1 BOX 2535
FORT WHITE, FL 32038**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

U00000170548
08/20/04-80005-010 558.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(f), 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: *Gloria E. Davis, Sec. Treas.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8-17-04