

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 816485

FILED
Jan 23, 2008
Secretary of State

Entity Name: PIKE ELECTRIC, INC.

Current Principal Place of Business:

100 PIKE WAY
MOUNT AIRY, NC 27030 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 868
MOUNT AIRY, NC 27030 US

New Mailing Address:

FEI Number: 56-0587238 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: CEO () Delete
Name: PIKE, JOSEPH E CEO/P
Address: 4155 WINDING OAKS TRAIL
City-St-Zip: LEWISVILLE, NC 27023

Title: CFO () Delete
Name: SLATER, ANTHONY K CFO
Address: 6440 OLD US 421 HWY
City-St-Zip: EAST BEND, NC 27018

Title: TREA () Delete
Name: MULLINS, JONATHAN H TREAS
Address: 485 PINEVIEW DRIVE
City-St-Zip: MOUNT AIRY, NC 27030

Title: SEC () Delete
Name: FOX, JAMES R SEC
Address: 626 SUMMIT STREET
City-St-Zip: WINSTON-SALEM, NC 27101

Title: VP () Delete
Name: SIMMONS, AUDIE G VP
Address: 1945 REEVES MILL ROAD
City-St-Zip: MOUNT AIRY, NC 27030

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: PIKE, JOSEPH E CEO/P
Address: 2350 WILLIAMS ROAD
City-St-Zip: LEWISVILLE, NC 27023

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

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: JONATHAN H. MULLINS

TREA

01/23/2008

Electronic Signature of Signing Officer or Director

_____ Date