

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 847318

Entity Name: SIDES ELECTRIC CO., INC.

FILED  
May 30, 2006  
Secretary of State

## Current Principal Place of Business:

151 MARY ESTHER BLVD  
SUITE 507  
MARY ESTHER, FL 32569

## New Principal Place of Business:

1209 N. PALAFOX STREET  
PENSACOLA, FL 32501 US

## Current Mailing Address:

P.O. BOX 5554  
DESTIN, FL 32541

## New Mailing Address:

P.O. BOX 12566  
PENSACOLA, FL 32591 US

FEI Number: 58-1140831

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SIDES, MARILYN  
7 CROSS CT  
PO BOX 242  
DESTIN, FL 32541 US

## Name and Address of New Registered Agent:

SIDES, MARILYN  
1209 N. PALAFOX STREET  
PENSACOLA, FL 32501 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: MARILYN SIDES

05/30/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SIDES, MARILYN E.,  
Address: 7 CROSS CT  
City-St-Zip: DESTIN, FL

Title: V ( ) Delete  
Name: SIDES, THOMAS H,  
Address: 7 CROSS CT  
City-St-Zip: DESTIN, FL

Title: S ( ) Delete  
Name: SIDES, THOMAS H,  
Address: 7 CROSS CT  
City-St-Zip: DESTIN, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SIDES, MARILYN  
Address: 1209 N. PALAFOX STREET  
City-St-Zip: PENSACOLA, FL 32501 US

Title: V (X) Change ( ) Addition  
Name: SIDES, THOMAS H  
Address: 1209 N. PALAFOX STREET  
City-St-Zip: PENSACOLA, FL 32501 US

Title: S (X) Change ( ) Addition  
Name: SIDES, THOMAS H  
Address: 1209 N. PALAFOX STREET  
City-St-Zip: PENSACOLA, FL 32501 US

I hereby certify that the information supplied with this filing does not qualify for the 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: MARILYN SIDES

PRES

05/30/2006

Electronic Signature of Signing Officer or Director

Date