

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005669

FILED  
Jan 07, 2011  
Secretary of State

**Entity Name:** LRE ROYAL ELECTRICAL CONTRACTORS, INC.

**Current Principal Place of Business:**

13008 LAWSON RD  
LITTLE ROCK, AR 72210

**New Principal Place of Business:**

**Current Mailing Address:**

13008 LAWSON RD  
LITTLE ROCK, AR 72210

**New Mailing Address:**

**FEI Number:** 71-0540222

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH 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

**OFFICERS AND DIRECTORS:**

Title: S/T  
Name: WARNER, STEPHANIE S  
Address: 12301 BRODIE CREEK TRAIL  
City-St-Zip: LITTLE ROCK, AR 72211 US

Title: CFO  
Name: SMITH, MIKE D  
Address: 1223 ALLEN RD  
City-St-Zip: BISMARCK, AR 71929 US

Title: PRES  
Name: SMITH, RANDY C  
Address: 135 DEAUVILLE DRIVE  
City-St-Zip: MAUMELLE, AR 72113 US

Title: VP  
Name: WALLACE, LAWRENCE D  
Address: 6809 HOLLY LANE  
City-St-Zip: MABELVALE, AR 72103 US

Title: CEO  
Name: SMITH, GEORGE E  
Address: 1223 ALLEN RD  
City-St-Zip: BISMARCK, AR 71929

I hereby 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 all other like empowered.

SIGNATURE: MIKE SMITH

CFO

01/07/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date