

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002397

FILED
Jan 14, 2008
Secretary of State

Entity Name: T & J ELECTRICAL ASSOCIATES INC.

Current Principal Place of Business:

1090 INNOVATION AVE.
UNIT A118
NORTH PORT, FL 34289

New Principal Place of Business:

Current Mailing Address:

1090 INNOVATION AVE.
UNIT A118
NORTH PORT, FL 34289

New Mailing Address:

FEI Number: 14-1627408 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SESTITO, ANTHONY M PCD.
1090 INNOVATION AVE.
UNIT A118
NORTH PORT, FL 34289 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: PCD () Delete
Name: SESTITO, ANTHONY M
Address: 11 STAULTERS FARM ROAD
City-St-Zip: BALLSTON SPA, NY 12020

Title: VP () Delete
Name: SESTITO, JOSEPH S
Address: 120 ROWE LANE
City-St-Zip: VALLEY FALLS, NY 12185

Title: S () Delete
Name: SESTITO, JOAN M
Address: 11 STAULTERS FARM ROAD
City-St-Zip: BALLSTON SPA, NY 12020

Title: T () Delete
Name: SESTITO, GINO J
Address: 7 BRENTWOOD AVE.
City-St-Zip: TROY, NY

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:

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: ANTHONY SESTITO

PRES

01/14/2008

Electronic Signature of Signing Officer or Director

Date