

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000002056

FILED
Mar 29, 2010
Secretary of State

Entity Name: KENNETH ALDRIDGE ELECTRIC, INC.

Current Principal Place of Business:

844 E ROCKLAND RD
LIBERTYVILLE, IL 60048

New Principal Place of Business:

Current Mailing Address:

844 E ROCKLAND RD
LIBERTYVILLE, IL 60048

New Mailing Address:

FEI Number: 36-2355856

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO
Name: ALDRIDGE, KENNETH W
Address: 844 E ROCKLAND RD
City-St-Zip: LIBERTYVILLE, IL 60048

Title: P
Name: RIVI, STEPHEN E
Address: 844 E ROCKLAND RD
City-St-Zip: LIBERTYVILLE, IL 60048

Title: T
Name: GIERKE, TODD N
Address: 844 E ROCKLAND RD
City-St-Zip: LIBERTYVILLE, IL 60048

Title: S
Name: RADTKE, BONNIE A
Address: 844 E ROCKLAND RD
City-St-Zip: LIBERTYVILLE, IL 60048

Title: EVP
Name: ALDRIDGE, L. WARREN
Address: 844 E ROCKLAND RD
City-St-Zip: LIBERTYVILLE, IL 600489504

Title: EVP
Name: KUTSCHKE, EDWARD F
Address: 844 E ROCKLAND RD
City-St-Zip: LIBERTYVILLE, IL 60048

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: TODD N. GIERKE

T

03/29/2010

Electronic Signature of Signing Officer or Director

_____ Date