

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # F53210

1. Entity Name
M. E. LIGHTING & ELECTRIC, INC.



Principal Place of Business
2420 REID STREET
PALATKA, FL 32177 US

Mailing Address
2420 REID STREET
PALATKA, FL 32177 US

FILED
Apr 07, 2006 08:00 AM
Secretary of State



04062006 No Chg-P CR2E034 (11/05)

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4. FEI Number
59-2289210

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FILLMAN, MARTIN C.
2420 REID STREET
PALATKA, FL 32177

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept, the obligations of registered agent

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	FILLMAN, MARTIN C
STREET ADDRESS	2420 REID ST
CITY-ST-ZIP	PALATKA, FL
TITLE	VD
NAME	FILLMAN, PATRICIA D
STREET ADDRESS	2420 REID ST
CITY-ST-ZIP	PALATKA, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/21/06-80038-013 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Martin C. Fillman

MARTIN C. FILLMAN

04-06-06

(386)
325-96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Office Phone #