


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 12, 2004 08:00 AM
Secretary of State

DOCUMENT # G17274 <small>1. Entity Name</small> R. C. ELECTRIC, INC.	
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<small>Principal Place of Business</small> 318 MARIANNE ST. BROOKSVILLE, FL 34601 US	<small>Mailing Address</small> 318 MARIANNE ST. BROOKSVILLE, FL 34601 US
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DO NOT WRITE IN THIS SPACE



03022004 No Chg-P CR2E034 (10/03)

<small>4. FEI Number</small> 59-2246702	<small>Applied For</small> <input type="checkbox"/> Not Applicable
<small>5. Certificate of Status Desired</small> <input type="checkbox"/> \$8.75 Additional Fee Required	

<small>6. Name and Address of Current Registered Agent</small> EPPEY, WILLIAM B. 129 N. MAIN ST. BROOKSVILLE, FL 34601	DO NOT WRITE IN THIS SPACE
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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 (Applicable) (NOTE: Registered Agent's signature may be filed when re-registering) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	<small>9. Election Campaign Financing Trust Fund Contribution.</small> <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
<small>TITLE</small> PD <small>NAME</small> HAGY, RAY ALLEN <small>STREET ADDRESS</small> 318 MARIANNE ST. <small>CITY - ST - ZIP</small> BROOKSVILLE, FL	<p>U000000109529 04/12/04-80047-004 150.00</p> <p>DO NOT WRITE IN THIS SPACE</p>
<small>TITLE</small> STD <small>NAME</small> HAGY, CAROL SUE <small>STREET ADDRESS</small> 318 MARIANNE ST. <small>CITY - ST - ZIP</small> BROOKSVILLE, FL	
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	
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<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	4-8-04 <small>Date</small>	352-796 0437 <small>Daytime Phone #</small>
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