

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008 08:00 A
Secretary of State

DOCUMENT # H19887

1. Entity Name
JERRY'S ELECTRICAL SERVICE, INC.



Principal Place of Business
**1811 BURNS DRIVE
TALLAHASSEE, FL 32303**

Mailing Address
**P.O. BOX 3213
TALLAHASSEE, FL 32315**



04022008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2445895

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

6. Name and Address of Current Registered Agent

**JONES, MARLENE
1811 BURNS DR
TALLAHASSEE, FL 32303**

**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

Marlene J. Jones

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	FOLEY, JEFFREY
STREET ADDRESS	PO BOX 3213
CITY, ST, ZIP	TALLAHASSEE, FL 32315
TITLE	PD
NAME	JONES, HOWARD
STREET ADDRESS	1811 BURNS DR
CITY, ST, ZIP	TALLAHASSEE, FL 32303
TITLE	STD
NAME	JONES, MARLENE
STREET ADDRESS	1811 BURNS DR
CITY, ST, ZIP	TALLAHASSEE, FL 32303
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

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04/22/08-80036-003 158.75

**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 if changed, or on an attachment with an address, with an officer like empowered.

SIGNATURE:

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeff Foley