

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 08, 2006 8:00 am
Secretary of State

02-08-2006 90012 036 ***150.00

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1. Entity Name

UNITED ELECTRICAL CONTRACTORS, INC.



Principal Place of Business

1428 E. SEMORAN BLVD
SUITE 112
APOPKA FL 32703
US

Mailing Address

PO BOX 729
APOPKA FL 32704



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/05)

4. FEI Number
59-2544303

Applied For
Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ADAMS, ROBERT M.
1428 E SEMORAN BLVD
APOPKA FL 32703

7. Name and Address of New Registered Agent

Name

Paul E. Gifford

Street Address (P.O. Box Number is Not Acceptable)

1428 E. Semoran Blvd.

City

Apopka

FL

Zip Code
32703

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

Paul E. Gifford

January 26, 2006

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☒ Delete
NAME ADAMS, ROBERT M.
STREET ADDRESS 1428 E. SEMORAN BLVD SUITE 112
CITY-ST-ZIP APOPKA FL 32703

TITLE VP ☒ Delete
NAME GIFFORD, PAUL E.
STREET ADDRESS 1428 E. SEMORAN BLVD SUITE 112
CITY-ST-ZIP APOPKA FL 32703

TITLE TS ☒ Delete
NAME GIFFORD, THOMAS
STREET ADDRESS 1428 E. SEMORAN BLVD, SUITE 112
CITY-ST-ZIP APOPKA FL 32703

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President ☒ Change ☐ Addition
NAME Paul E. Gifford
STREET ADDRESS 1428 E. Semoran Blvd, Suite 112
CITY-ST-ZIP Apopka, FL 32703

TITLE Vice-President ☐ Change ☒ Addition
NAME Richard H. Russell
STREET ADDRESS 1428 E. Semoran Blvd., Suite 112
CITY-ST-ZIP Apopka, FL 32703

TITLE Vice-President ☒ Change ☐ Addition
NAME Thomas A. Gifford
STREET ADDRESS 1428 E. Semoran Blvd., Suite 112
CITY-ST-ZIP Apopka, FL 32703

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 all other like empowered.

SIGNATURE:

Paul E. Gifford

January 26, 2006

407-886-3813

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #