

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Feb 03, 2006 08:00 AM
Secretary of State**

DOCUMENT # H62732

1. Entity Name
GLM ELECTRICAL CORPORATION, INC.



Principal Place of Business
17964 LOXAHATCHEE RIVER RD.
JUPITER, FL 33458 US

Mailing Address
P.O. BOX 1593
JUPITER, FL 33468-1593 US



01262006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2541877

Applied For
Not Applied

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

6. Name and Address of Current Registered Agent

MARSHA, GARY LEROY
17964 LOXAHATCHEE RIVER RD.
JUPITER, FL 33458

**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

SIGNATURE Mary L. Marsha GARY L. MARSHA PVS 1/28/2006
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**

9. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution. Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PVS
NAME	MARSHA, GARY LEROY
STREET ADDRESS	17964 LOXAHATCHEE RIVER
CITY-ST-ZIP	JUPITER, FL 33458
TITLE	T
NAME	CASS, PATRICIA K
STREET ADDRESS	17964 LOXAHATCHEE RIVER DR
CITY-ST-ZIP	JUPITER, FL 33458
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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 all other like empowered.

SIGNATURE: Mary L. Marsha GARY L. MARSHA PVS 1/28/06 561-744-2987
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #