2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J18391

1. Entity Name

GILMORE ELECTRIC COMPANY, INC.



FILED Feb 14, 2008 08:00 AM Secretary of State

Principal Place of Business

2875 JUPITER PARK DR.

SUITE 1800

JUPITER, FL 33458 US

Mailing Address

2875 JUPITER PARK DR.

SUITE 1800

JUPITER, FL 33458



02062008

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2676914

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Addit Fee Required

6. Name and Address of Current Registered Agent

LOVELAND DAVID J 9174 VALLEY OAK PLACE JUPITER, FL 33478

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

15-

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, 2008 Fee will be \$550.00

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

10.	OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST LOVELAND, CAROL T 9174 VALLEY OAK PLACE JUPITER, FL 33478
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LOVELAND, DAVID J. 9174 VALLEY OAK PL JUPITER, FL 33478
NAME STREET ADDRESS CITY-ST-ZIP	VP LOVELAND, RANDALL M 6111 KENDRICK ST. PALM BEACH GARDENS, FL 33418
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LOVELAND, DANIEL J 25101 SW 95TH STREET INDIANTOWN, FL 34956
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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DO NOT WRITE IN THIS SPACE

12. If hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, if 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 especially 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 amaddress, with all to the like empowered.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-11-08 (361)744-800

Daytime Phone