2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J62981

1. Entity Name

KMS ELECTRIC COMPANY INC.



Principal Place of Business

Mailing Address

1211 HAMLET AVE.

SUITE B

CLEARWATER, FL 33765

% KARL M. SHROCK 308 ENGMAN ST.

CLEARWATER, FL 34615-2400

FILED Apr 07, 2008 08:00 A Secretary of State



DO NOT WRITE IN THIS SPACE

04032008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2778755

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SHROCK, CARL M. 308 ENGMAN ST. CLEARWATER, FL 33515

DO NOT WRITE

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 if applicable (NOTE Registered Agent signature required when reinstating) DATE				
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS	· · · · · · · · · · · · · · · · · · ·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHROCK, KARL M. 308 ENGMAN ST. CLEARWATER, FL			
TITLE NAME STREET ADDRESS GITY-ST-ZIP		4. 3. 4. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5.		04/16/08-80062-011-150-00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOTWRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_		INT	HIS SPACE
TITLE 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 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:

TITLE NAME STREET ADDRESS

CONSTURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/08 727.44(2360

KLEL M. SKNOCK