2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # K98428

Entity Name
 GILLIS ELECTRIC, INC.



FILED Mar 12, 2007 08:00 AM Secretary of State

Principal Place of Business

% BRUCE E. GILLIS 26276 ARBERG ROAD BROOKSVILLE, FL 34601 Mailing Address

% BRUCE E. GILLIS 26276 ARBERG ROAD BROOKSVILLE, FL 34601



DO NOT WRITE IN THIS SPACE

02282007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2954383

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

GILLIS, BRUCE E. 26276 ARBERG ROAD BROOKSVILLE, FL 34601

DO NOT WRITE IN THIS SPACE

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|---|--|--|-----------------|--------------------------------|---|--|
| 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 | f applicable. (NOTE: Registered | Agent signature | required when reinstating) | DATE | |
| | | Election Campaign Financ Trust Fund Contribution. | | \$5.00 May Be Added to Fees | | |
| 10. | OFFICERS AND DIRECTORS | | | , | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D GILLIS, BRUCE E. 26276 ARBERG ROAD BROOKSVILLE, FL | | ; | | U00000662773 03/21/07-80027-011 150.00 | |
| TITLE NAME STREET ADDRESS CITY+ST-ZIP | D GILLIS, MONICA H. 26276 ARBERG ROAD BROOKSVILLE, FL | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | DO | NOT WRITE | |
| TITLE NAME STREET ADDRESS | | ,, <u>va. m.</u> , | 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.

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SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE

02/08/0-

799-3341

Daytime Pho