2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2008
Secretary of State

DOCUMENT# L64815

Entity Name: THOMAS E. RICHMOND ELECTRIC, INC.

Current Principal Place of Business:

3086 ENTERPRISE RD
FT. PIERCE, FL 34982 US

New Principal Place of Business:

Current Mailing Address:

3086 ENTERPRISE RD
FT. PIERCE, FL 34982

New Mailing Address:

FEI Number: 65-0182447 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RICHMOND, THOMAS E.
2717 S. 19TH ST.
FT. PIERCE, FL 34982 US

Name and Address of New Registered Agent:

RICHMOND, THOMAS E.
2717 S 19TH STREET
FT. PIERCE, FL 34982 US

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.

SIGNATURE: _____ 02/07/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	RICHMOND, THOMAS E	
Address:	2717 S 19TH STREET	
City-St-Zip:	FT. PIERCE, FL 34982	
Title:	STD	( ) Delete
Name:	RICHMOND, JACKIE B	
Address:	2717 S 19TH STREET	
City-St-Zip:	FT. PIERCE, FL 34982	
Title:	V	( ) Delete
Name:	RICHMOND, CHRISTOPHER W	
Address:	6440 NW POLLY COURT	
City-St-Zip:	PORT ST. LUCIE, FL 34983	
Title:	V	( ) Delete
Name:	WALDRON, SHARON	
Address:	6869 NW DRAGON STREET	
City-St-Zip:	PORT ST LUCIE, FL 34983	
Title:	V	( ) Delete
Name:	RICHMOND II, THOMAS E	
Address:	663 RIO VISTA DRIVE	
City-St-Zip:	FT PIERCE, FL 34982	
Title:	V	( ) Delete
Name:	MCWHORTER, MELISSA R	
Address:	1756 W SANDERLING LANE	
City-St-Zip:	FT. PIERCE, FL 34982	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	V	(X) Change ( ) Addition
Name:	RICHMOND II, THOMAS E	
Address:	914 DELAWARE AVENUE	
City-St-Zip:	FT PIERCE, FL 34950	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHARON WALDRON V 02/07/2008
Electronic Signature of Signing Officer or Director — Date