2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L64815

FILED Apr 20, 2009 Secretary of State

Entity Name: THOMAS E. RICHMOND ELECTRIC, INC.

Current Principal Place of Business:				New Principal Place of Business:	
3086 ENTERPRISE RD FT. PIERCE, FL 34982 US					
Current Mailing Address:				New Mailing Address:	
3086 ENTERPRISE RD FT. PIERCE, FL 34982			3086 ENTERPRISE RD FT. PIERCE, FL 34982 US		
FEI Number:	65-0182447	FEI Number Applied For ()	FEI Num	nber Not Applicable()	Certificate of Status Desired (X)
Name and Address of Current Registered Agent: 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:					
	Electroni	c Signature of Registered Agent	t		Date
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () I RICHMOND, THO 2717 S 19TH ST FT. PIERCE, FL	REET		Title: (Name: Address: City-St-Zip:) Change () Addition
Title: Name: Address: City-St-Zip:	STD () I RICHMOND, JAC 2717 S 19TH ST FT. PIERCE, FL	REET		Title: (Name: Address: City-St-Zip:) Change () Addition
Title: Name: Address: City-St-Zip:	V () I RICHMOND, CHI 6440 NW POLLY PORT ST. LUCIE	COURT		Title: (Name: Address: City-St-Zip:) Change () Addition
Title: Name: Address: City-St-Zip:	V () I WALDRON, SHA 6869 NW DRAG PORT ST LUCIE	ON STREET		Title: (Name: Address: City-St-Zip:) Change () Addition
Title: Name: Address: City-St-Zip:	V () I RICHMOND II, TI 914 DELAWARE FT PIERCE, FL	AVENUE		Title: (Name: Address: City-St-Zip:) Change ()Addition
Title: Name: Address: City-St-Zip:	V () I MCWHORTER, N 1756 W SANDER FT. PIERCE, FL	RLING LANE		Title: (Name: Address: City-St-Zip:) Change()Addition
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					

SIGNATURE: SHARON WALDRON V 04/20/2009

above, or on an attachment with an address, with all other like empowered.