

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000020908

FILED  
Mar 29, 2005  
Secretary of State

Entity Name: JOEL FOY ELECTRICAL SERVICE, INC.

## Current Principal Place of Business:

5804 DONNESBURY WAY  
TALLAHASSEE, FL 32303

## New Principal Place of Business:

4709 KNOLLWOOD DRIVE  
TALLAHASSEE, FL 32303

## Current Mailing Address:

P O BOX 3346  
TALLAHASSEE, FL 32315

## New Mailing Address:

FEI Number: 59-3627433      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FOY, JOEL  
5804 DONNESBURY WAY  
TALLAHASSEE, FL 32303      US

## Name and Address of New Registered Agent:

FOY, JOEL  
4709 KNOLLWOOD DRIVE  
TALLAHASSEE, FL 32303      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: \_\_\_\_\_

03/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FOY, JOEL H  
Address: 5804 DOONESBURY WAY  
City-St-Zip: TALLAHASSEE, FL 32303

Title: S ( ) Delete  
Name: FOY, MARYANN  
Address: 5804 DOONESBARY WAY  
City-St-Zip: TALLAHASSEE, FL 32303

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FOY, JOEL H  
Address: 4709 KNOLLWOOD DR  
City-St-Zip: TALLAHASSEE, FL 32303

Title: S (X) Change ( ) Addition  
Name: FOY, MARYANN  
Address: 4709 KNOLLWOOD DR  
City-St-Zip: TALLAHASSEE, FL 32303

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOEL H FOY

P

03/29/2005

Electronic Signature of Signing Officer or Director

Date