2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000016220

1. Entity Name

ENERGY ERECTORS, INC.



FILED Jan 15, 2004 08:00 AM Secretary of State

Principal Place of Business

31588 PROGRESS RD. LEESBURG, FL 34748 Mailing Address

31588 PROGRESS RD. LEESBURG, FL 34748



01062004

No Chg-P

CR2E034 (10/03)

4. FEI Number 39-1363163 Applied For Not Applicable

5. Certificate of Status Desired

M

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

8. Name and Address of Current Registered Agent

SCHINDERLE, GERALD 31588 PROGRESS RD. LEESBURG, FL 34748

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the poons of registered agent.	ourpose of changing its registere	d office or a	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Summary, typed or printed name of registered anient and title	/ employetia (NETE: Societario)	Anord a constant	? sequired when senialating)	CATE	
FILI	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaigs Finas Trust Fund Contribution.		\$5.00 May 8e Added to Fees		
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CHY-ST-ZIP	COB BRULE, JOYCE S 31588 PROGRESS RD. LEESBURG, FL 34748				U00000005516 01/15/04-80056-007 158.75	
TITLE MAME STREET ADDRESS CITY-ST-ZIP	P BEERS, WILLIAM L 5329 TWIN PALMS ROAD FRUITLAND PARK, FL 34731				01/15/04-80056-00(.158.65.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SCHINDERLE, GERALD A 1766 CRESTVIEW DRIVE MOUNT DORA, FL 32757			DO NOT WRITE		
TITLE NAME STREET ADDRESS CXTY-ST-ZIP	VP KEATING, THOMAS P 418 POINSETTA AVE INVERNESS, FL 34452			IN THIS SPACE		
NAME STREET ADDRESS COLVESTE TRE	C BRULE, WARREN J 31588 PROGRESS RD.					

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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
CITY-ST-ZIP

HE AND TIPED ON PRINTED NAME OF SIGNING OFFICER OR OTRECTOR

1/9/04

352-787-3878

Devimo Phona #