

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 06, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000016220

1. Entity Name
ENERGY ERECTORS, INC.



Principal Place of Business
**31588 PROGRESS RD.
LEESBURG, FL 34748**

Mailing Address
**31588 PROGRESS RD.
LEESBURG, FL 34748**



01112006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
39-1363163

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SCHINDERLE, GERALD
31588 PROGRESS RD.
LEESBURG, FL 34748**

**DO NOT WRITE
IN THIS SPACE**

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 if applicable

(NOTE: Registered Agent Signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**COB
BRULE, JOYCE S
31588 PROGRESS RD.
LEESBURG, FL 34748**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
BEERS, WILLIAM L
5329 TWIN PALMS ROAD
FRUITLAND PARK, FL 34731**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ST
SCHINDERLE, GERALD A
1766 CRESTVIEW DRIVE
MOUNT DORA, FL 32757**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
KEATING, THOMAS P
418 POINSETTA AVE
INVERNESS, FL 34452**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**C
BRULE, WARREN J
31588 PROGRESS RD.
LEESBURG, FL 34748**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000423794
02/18/06-80023-007 158.75

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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.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gerald A Schinderle

2/3/06

352-787-3878

Date

Daytime Phone #