2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000019161

1. Entity Name
FASON'S ELECTRICAL SERVICE, INC.

Principal Place of Business	Mailing Address
12421 SR 24 CEDAR KEY, FL 32625	PO BOX 46 CEDAR KEY, FL 32625

DO NOT WRITE IN THIS SPACE

04222006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3699263
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CAUSEY, KATHRYN F
12421 SR 24
CEDAR KEY, FL 32625

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	PSD
NAME	FASON, RICHARD L
STREET ADDRESS	9260 SW 10TH CW (MAIL PO BOX 1038)
CITY-ST-ZIP	TRENTON, FL 32693
TITLE	T
NAME	CAUSEY, KATHRYN F
STREET ADDRESS	12421 SR 24 (MAIL PO BOX 46)
CITY-ST-ZIP	CEDAR KEY, FL 32625
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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TITLE	
NAME	
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CITY-ST-ZIP	

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05/17/06-80096-018 150.00

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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: K Causey CPA, PR 4/26/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #