

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000072703

FILED
Apr 20, 2006
Secretary of State

Entity Name: ELITE ELECTRICAL CONTRACTORS, INC.

Current Principal Place of Business:

12155 METRO PKWY
#15-A
FORT MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

12155 METRO PKWY
#15-A
FORT MYERS, FL 33912

New Mailing Address:

FEI Number: 65-1131867

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FITZ, CHIPPER D
1201 EUCLID AVE
LEHIGH ACRES, FL 33936 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FITZ, CHIPPER D
Address: 1201 EUCLID AVENUE
City-St-Zip: LEHIGH ACRES, FL 33936 US

Title: VP () Delete
Name: FORGIONE, ANTHONY R
Address: 4112 SE 19TH PLACE
City-St-Zip: CAPE CORAL, FL 33904 US

Title: S () Delete
Name: FITZ, SHANNON B
Address: 1201 EUCLID AVENUE
City-St-Zip: LEHIGH ACRES, FL 33936 US

Title: T () Delete
Name: FITZ, SHANNON B
Address: 1201 EUCLID AVENUE
City-St-Zip: LEHIGH ACRES, FL 33936 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHIPPER FITZ

PRES

04/20/2006

Electronic Signature of Signing Officer or Director

Date