2008 FOR PROFIT CORPORATION ANNUAL REPORT

Mailing Address

3. Mailing Address

Suite, Apt. #, etc.

BASS AND SANDFORT ACCOUNTANTS PA

1301 WEST GARDEN STREET

PENSACOLA, FL 32501

DOCUMENT # P01000089071

2. Principal Place of Business - No P.O. Box #

Principal Place of Business

6054 MANDIE LN

MILTON, FL 32570

Suite, Apt. #, etc.

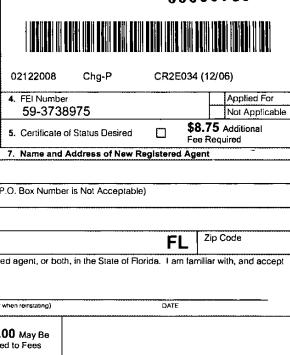
1. Entity Name CARTER ELECTRIC OF NORTHWEST FLORIDA, INC.



FILED Mar 20, 2008 8:00 am Secretary of State

03-20-2008 90037 030 ***150.00

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City & State	9	City & Sta	City & State		4. FEI Numb 59-373				plied For t Applicable	
Zip	Country	Country Zip Co		Country	5. Certificate	of Status Desired		8.75 Addi ee Required		
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent					
SANDFORT, SCOTT					Name					
BASS AND SANDFORT ACCOUNTANTS, INC. 1301 W GARDEN STREET				Street Add	Street Address (P.O. Box Number is Not Acceptable)					
PENSACOLA, FL 32501-4504										
					,		FL	Zip Code		
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					e required when reinstating)		DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.					\$5.00 May Be Added to Fees					
10.	OFFICERS A	AND DIRECTORS		11.	ADDITIONS	CHANGES TO OFFI	CERS AND	DIRECTORS	3 IN 11	
TITLE	PTD		☐ Delete	TITLE				☐ Change	Addition	
NAME	CARTER, CARL B		1	NAME						
STREET ADDRESS	6054 MANDIE LN		1	STREET ADDRESS						
CITY-ST-ZIP	MILTON, FL 32570			CITY-ST-ZIP						
TITLE	SVD		Delete	TITLE				☐ Change	☐ Addition	
NAMÉ	CARTER, SHERRY E		i i	NAME						
STREET ADDRESS	6054 MANDIE LN			STREET ADDRESS						
CITY-ST-ZIP	MILTON, FL 32570		ļ	CITY-ST-ZIP						
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supplemental report is true and accurate and that my signature shall have the same legal effect as it made under eath; that I am an officer or director 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 imper with an address, with all other like empowered. indicated on this report the corporation or changed, or on an at

SIGNATURE