2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000091170

FILED May 01, 2009 Secretary of State

Entity Name: MARC CARROLL ELECTRICAL SERVICE, I	NC.	
Current Principal Place of Business:	New Princ	ipal Place of Business:
196 SW 2ND STREET UNIT C-2 POMPANO BEACH, FL 33060 US		
Current Mailing Address:	New Mailir	ng Address:
POST OFFICE BOX 10176 POMPANO BEACH, FL 33061		
FEI Number: 48-1292836 FEI Number Applied For () FEI	l Number Not Appli	icable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Current Registered Agent: Name and Address of New Registered Agent:	
REILLY ROCHE LLP 600 CORPORATE DRIVE SUITE # 510 FORT LAUDERDALE, FL 33308 US The above named entity submits this statement for the purposin the State of Florida.	se of changing it	s registered office or registered agent, or both,
SIGNATURE:		
Electronic Signature of Registered Agent		Date
In accordance with s. 607.193(2)(b), F.S., the corporation did not rece Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:	•	e. S/CHANGES TO OFFICERS AND DIRECTORS:
Title: P/T () Delete Name: MC NALLY, MARK Address: POST OFICE BOX 10176 City-St-Zip: POMPANO BEACH, FL 33061	Title: Name: Address: City-St-Zip:	S/T (X) Change () Addition MC NALLY, MARK POST OFICE BOX 10176 POMPANO BEACH, FL 33061
Title: () Delete Name: Address: City-St-Zip:	Title: Name: Address: City-St-Zip:	V.P. () Change (X) Addition WHITE, JAMES A POST OFFICE BOX 10176 POMPANO BEACH, FL 33061
Title: () Delete Name: Address: City-St-Zip:	Title: Name: Address: City-St-Zip:	P () Change (X) Addition WHITE, TYLER C POST OFFICE BOX 10176 POMPANO BEACH, FL 33061

I hereby certify that the information supplied with this filing does not qualify 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: MARK MC NALLY S/T 05/01/2009