

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000117755

Entity Name: PHD ELECTRIC, INC.

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

103 COLUMBUS AVE
LEHIGH ACRES, FL 33936

New Principal Place of Business:

Current Mailing Address:

103 COLUMBUS AVE
LEHIGH ACRES, FL 33936

New Mailing Address:

FEI Number: 90-0053425

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALL FLORIDA FIRM INC
465 S VOLUSIA AVE
SUITE C
ORANGE CITY, FL 32763 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: D () Delete
Name: DIX, HARRIS
Address: 2313 HAMILTON AVENUE
City-St-Zip: ALVA, FL 33920

Title: V () Delete
Name: DIX, PAULINE
Address: 2313 HAMILTON AVENUE
City-St-Zip: ALVA, FL 33920

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DIX, HARRIS
Address: 103 COLUMBUS AVENUE
City-St-Zip: LEHIGH ACRES, FL 33936

Title: V (X) Change () Addition
Name: DIX, PAULINE
Address: 103 COLUMBUS AVENUE
City-St-Zip: LEHIGH ACRES, FL 33936

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: HARRIS DIX

D

04/27/2009

Electronic Signature of Signing Officer or Director

Date