


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jul 19, 2006 8:00 am**  
**Secretary of State**

07-07-2006 90004 008 \*\*\*550.00

<b>DOCUMENT # P02000118305</b>					
1. Entity Name <b>DKP ELECTRICAL SYSTEMS, INC.</b>					
Principal Place of Business <b>5113 BUCHANAN DRIVE FT. PIERCE FL 34982</b>			Mailing Address <b>5113 BUCHANAN DRIVE FT. PIERCE FL 34982</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number <b>80-0021985</b>	
				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>POTTER, KENNETH R 5113 BUCHANAN DRIVE FT. PIERCE FL 34982</b>			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			<div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>		
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 <u><i>Kenneth R. Potter</i></u> <u><i>Kenneth R. Potter</i></u> <u><i>7-17-06</i></u> <small>Signature must be printed name of registered agent and full if applicable (NOTE: Registered Agent signature required when modifying) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00.</b> <b>After May 1, 2006 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	POTTER, KENNETH R		NAME		
STREET ADDRESS	5113 BUCHANAN DRIVE		STREET ADDRESS		
CITY-ST-ZIP	FT. PIERCE FL 34982		CITY-ST-ZIP		
TITLE	STD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	POTTER, JAYME CAMPBELL		NAME		
STREET ADDRESS	5113 BUCHANAN DRIVE		STREET ADDRESS		
CITY-ST-ZIP	FT. PIERCE FL 34982		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARDENAS, MARK KEVIN		NAME		
STREET ADDRESS	121 NW DOREEN STREET		STREET ADDRESS		
CITY-ST-ZIP	PORT ST. LUCIE FL 34983		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: <u><i>Kenneth R. Potter</i></u> <u><i>Kenneth R. Potter</i></u> <u><i>7-17-06</i></u> <u><i>782-519-6200</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					