

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 26, 2004 8:00 am
Secretary of State

03-26-2004 90024 013 ***158.75

DOCUMENT # P03000005753

1. Entity Name

REGENCY ELECTRIC COMPANY, INC.



Principal Place of Business

4348 SOUTHPOINT BLVD.
SUITE 400
JACKSONVILLE FL 32216
US

Mailing Address

4348 SOUTHPOINT BLVD.
SUITE 400
JACKSONVILLE FL 32216
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E034 (11/03)

4. FEI Number
55-0814331

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HANNA, NANCY L
4348 SOUTHPOINT BLVD.
SUITE 400
JACKSONVILLE FL 32216

Name

Street Address (P.O. Box Number is Not Acceptable)

City

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 Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	C	<input type="checkbox"/> Delete
NAME	GREEN, ALAN J	
STREET ADDRESS	4348 SOUTHPOINT BLVD., SUITE 400	
CITY-ST-ZIP	JACKSONVILLE FL 32216	
TITLE	ST	<input type="checkbox"/> Delete
NAME	HANNA, NANCY L	
STREET ADDRESS	4348 SOUTHPOINT BLVD., SUITE 400	
CITY-ST-ZIP	JACKSONVILLE FL 32216	
TITLE	P	<input type="checkbox"/> Delete
NAME	CROCHET, DARRELL	
STREET ADDRESS	4348 SOUTHPOINT BLVD., SUITE 400	
CITY-ST-ZIP	JACKSONVILLE FL 32216	
TITLE	D	<input type="checkbox"/> Delete
NAME	GREEN, ALAN J	
STREET ADDRESS	4348 SOUTHPOINT BLVD., SUITE 400	
CITY-ST-ZIP	JACKSONVILLE FL 32216	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

[Signature] CFO

3/15/04

904-485-4054

Date

Daytime Phone #