

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000009093

Entity Name: PAUL GETCHELL ELECTRIC, INC.

FILED  
Jan 05, 2009  
Secretary of State

## Current Principal Place of Business:

169 N. CENTRAL AVENUE  
UMATILLA, FL 32784 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 1156  
UMATILLA, FL 32784 US

## New Mailing Address:

FEI Number: 65-1170889

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GETCHELL, PAUL M  
41629 SILVER DRIVE  
UMATILLA, FL 32784 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: PST ( ) Delete  
Name: GETCHELL, PAUL M  
Address: 41629 SILVER DRIVE  
City-St-Zip: UMATILLA, FL 32784

Title: VP ( ) Delete  
Name: CADWELL-GETCHELL, ELIZABETH  
Address: 41629 SILVER DRIVE  
City-St-Zip: UMATILLA, FL 32784

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: PAUL M. GETCHELL

PST

01/05/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date