

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000030190			
1. Entity Name BODIFORD ELECTRIC, INC.			
2. Principal Place of Business P.O. BOX 6273 TALLAHASSEE FL 32314-6273		3. Mailing Address P.O. BOX 6273 TALLAHASSEE FL 32314-6273	
4. State FL		City & State TALLAHASSEE FL	
5. Country USA		Country USA	
6. Name and Address of Current Registered Agent BODIFORD, BOBBY SR. 653 NEW LIGHT CHURCH ROAD CRAWFORDVILLE FL 32327		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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, obligations of registered agent.			
9. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reissuing) DATE			
10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
P BODIFORD, BOBBY SR. P.O. BOX 6273 TALLAHASSEE FL 32314-6273		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
T BODIFORD, KAREN V P.O. BOX 6273 TALLAHASSEE FL 32314-6273		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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1st MOORE CR2E034 (10/05)

4. FEI Number 83-0350999 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

FL Zip Code

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

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01/30/06-80026-019 150.00

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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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Karen V. Bodiford karen.v.bodiford 1/23/06 850-656-96