

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000030190

**FILED**  
**Feb 21, 2012**  
**Secretary of State**

**Entity Name:** BOBBY BODIFORD ELECTRIC, INC.

**Current Principal Place of Business:**

110 CROSSWAY RD.  
TALLAHASSEE, FL 32305

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 6273  
TALLAHASSEE, FL 323146273

**New Mailing Address:**

**FEI Number:** 83-0350999

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BODIFORD, BOBBY SR.  
653 NEW LIGHT CHURCH ROAD  
CRAWFORDVILLE, FL 32327 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BODIFORD, BOBBY SR.  
Address: P.O. BOX 6273  
City-St-Zip: TALLAHASSEE, FL 323146273

Title: T  
Name: BODIFORD, KAREN V  
Address: P.O. BOX 6273  
City-St-Zip: TALLAHASSEE, FL 323146273

I hereby 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 all other like empowered.

SIGNATURE: KAREN V. BODIFORD

T/S

02/21/2012

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

\_\_\_\_\_  
Date