

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000034149

**FILED**  
**Feb 03, 2005**  
**Secretary of State**

**Entity Name:** CORNERSTONE ELECTRICAL SYSTEMS, INC.

**Current Principal Place of Business:**

118 S. JESSAMINE AVE  
SANFORD, FL 32771

**New Principal Place of Business:**

2499 OLD LAKE MARY ROAD  
SUITE 128  
SANFORD, FL 32771

**Current Mailing Address:**

118 S. JESSAMINE AVE  
SANFORD, FL 32771

**New Mailing Address:**

2499 OLD LAKE MARY ROAD  
SUITE 128  
SANFORD, FL 32771

**FEI Number:** 11-3683676

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BYERTS, DEAN D  
118 S. JESSAMINE AVE  
SANFORD, FL 32771 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: P ( ) Delete  
Name: BYERTS, DEAN D  
Address: 118 S. JESSAMINE AVE  
City-St-Zip: SANFORD, FL 32771

Title: VP ( ) Delete  
Name: JACKSON, MICHAEL D  
Address: 116 ROCKHILL DR  
City-St-Zip: SANFORD, FL 32771

Title: S ( ) Delete  
Name: JACKSON, LIA  
Address: 116 ROCKHILL DR  
City-St-Zip: SANFORD, FL 32771

Title: T ( ) Delete  
Name: BYERTS, ALICE MARGARET  
Address: 118 S. JESSAMINE AVE  
City-St-Zip: SANFORD, FL 32771

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: S (X) Change ( ) Addition  
Name: JACKSON, LISA  
Address: 116 ROCKHILL DR  
City-St-Zip: SANFORD, FL 32771

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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:** DEAN D BYERTS

P

02/03/2005

Electronic Signature of Signing Officer or Director

Date