

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000051153					
1. Entity Name NORTHEAST FLORIDA ELECTRICAL SERVICES, INC.					
Principal Place of Business 1618 DEERUN TRAIL JACKSONVILLE, FL 32246			Mailing Address 1618 DEERUN TRAIL JACKSONVILLE, FL 32246		
2. Principal Place of Business		3. Mailing Address 10416 New Berlin Rd			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State Jacksonville, FL		4. FEI Number 200017290	
Zip	Country	Zip 32226	Country DUCAL	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 SOUTHWEST 22 STREET, 4TH FLOOR MIAMI, FL 33145			7. Name and Address of New Registered Agent		
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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____					
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE PVST NAME HARRELL, JAMES STREET ADDRESS 15744 Shark Rd W CITY-ST-ZIP JACKSONVILLE, FL 32246	<input type="checkbox"/> Delete		TITLE 4000417752904 NAME 10/11/04--01041--001 STREET ADDRESS **158.75 CITY-ST-ZIP	<input type="checkbox"/> Addition	
TITLE VP NAME Christopher Richardson STREET ADDRESS 1618 Deer Run Trail CITY-ST-ZIP Jacksonville, FL 32246	<input type="checkbox"/> Delete		TITLE Change <input type="checkbox"/> Addition <input type="checkbox"/>	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
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RECEIVED SEP 08 2004			RECEIVED		
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 James Harrell		09-03-04 (904) 226-9667			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #			

FILED

04 OCT -7 PM 2: 08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03052003 Chg-P CR2E034 (10/03)

Applied For
Not Applicable

\$8.75 Additional
Fee Required

FL

Zip Code

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

RECEIVED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
Jeb Bush, Governor
Diane Carr, Secretary



OCTOBER 5, 2004

DIVISION OF CORPORATIONS
PO BOX 1300
TALLAHASSEE, FL. 32302

TO WHOM IT MAY CONCERN:

THE DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATIONS HAS RECEIVED
YOUR REQUEST.

YOUR REQUEST CANNOT BE PROCESSED FOR THE FOLLOWING REASON (S):

ENCLOSED WITH THIS LETTER IS CHECK #1131, IN THE AMOUNT OF \$158.75.

THE ENCLOSED CHECK AND/OR PAPERWORK WAS FOWARDED TO OUR OFFICE IN
ERROR.

ALL CORRESPONDENCE MUST BE RETURNED TO THE ADDRESS BELOW.

THANK YOU FOR YOUR COOPERATION. IF YOU HAVE ANY QUESTIONS, PLEASE CALL THE
NUMBER BELOW.

ENCLOSURE
GMM