

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 18, 2005 08:00 AM
Secretary of State**

DOCUMENT # P03000076961

1. Entity Name
SAFE ELECTRICAL SERVICES, INC.



Principal Place of Business

**134 RIBERIA STREET
ST AUGUSTINE, FL 32084**

Mailing Address

**134 RIBERIA STREET
ST AUGUSTINE, FL 32084**



02242005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
51-0475584

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fees Required

6. Name and Address of Current Registered Agent

**GRUNDY, DONALD S
134 RIBERIA STREET
ST AUGUSTINE, FL 32084**

**DO NOT WRITE
IN THIS SPACE**

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

[Signature]

Donald S. Grundy

4/7/05

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

0000000310717

04/12/05 00017-001 153.75

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	GRUNDY, DONALD S
STREET ADDRESS	134 RIBERIA STREET
CITY-ST-ZIP	ST AUGUSTINE, FL 32084
TITLE	VT
NAME	GRUNDY, DAVID H SR
STREET ADDRESS	134 RIBERIA STREET
CITY-ST-ZIP	ST AUGUSTINE, FL 32084
TITLE	VS
NAME	GRAHAM, JOSEPH J
STREET ADDRESS	134 RIBERIA STREET
CITY-ST-ZIP	ST AUGUSTINE, FL 32084
TITLE	VPM
NAME	STEPHEN, GRUNDY J
STREET ADDRESS	134 RIBERIA STREET
CITY-ST-ZIP	ST AUGUSTINE, FL 32084
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

[Signature]

Donald S. Grundy

4/7/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #