## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

## Feb 11, 2004 8:00 am Secretary of State **DOCUMENT # P03000106773** 02-02-2004 90036 034 \*\*\*150.00 1. Entity Name YOUR ELECTRIC, INC. Principal Place of Business Mailing Address 871 CITRUS ROAD 871 CITRUS ROAD VENICE, FL 34293 VENICE, FL 34293 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01282004 CR2E034 (10/03) City & State City & State 4\_ FEI Numbe Applied For 99-0861 Not Applicable Country Country \$8.75 Additional Fee Required 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BECHTOLD, DANIEL A Street Address (P.O. Box Number is Not Acceptable) 871 CITRUS ROAD VENICE, FL 34293 Zip Code 5. The above rismed entity automits 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 eigneture required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE 9. Election Campaign Financing \$5.00 May Be Added to Fees FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TILE Delete TITLE ☐ Change Addition STROER, JOSEPH L NAME NAME 871 CITRUS ROAD CTREET ADADESS STREET ADDRESS VENICE, FL 34293 CITY-ST-ZIP CITY-ST-ZIP TIFLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZP IIILE Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP COTY - ST-72P TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ANDRESS STREET AMORESS CITY-ST-ZIP CITY-ST-ZIP tole ☐ Delete TITLE ☐ Change NAME MALLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP Change ☐ Detate TETLE ■ Addition The State of the Control NUME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP . CITY-ST-ZIP\*C\*\* 12. I hereby certify that the information supplied with this filling does not qualify for the examption 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 eignature shall have the same legal effect as if made under eath; 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. 941.408-9202

**FILED** 



attachment 66401556

## FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

February 4, 2004

YOUR ELECTRIC, INC. 871 CITRUS ROAD VENICE, FL 34293

Subject: YOUR ELECTRIC, INC.

Reference Number:

P03000106773

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/RW ANNUAL REPORTS SECTION