

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000115599

1. Entity Name
PAUL KIEFER ELECTRIC, INC.



Principal Place of Business
**3019 39TH ST, E
BRADENTON, FL 34208**

Mailing Address
**3019 39TH ST, E
BRADENTON, FL 34208**



01162007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 13-4267320	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**KIEFER, PAUL
3019 39TH ST, E
BRADENTON, FL 34208**

**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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DPST
NAME	KIEFER, PAUL
STREET ADDRESS	3019 39TH ST, E
CITY-ST-ZIP	BRADENTON, FL 34208
TITLE	VP
NAME	KIEFER, JASON M
STREET ADDRESS	4035 HONOLULU DR
CITY-ST-ZIP	SARASOTA, FL 34241
TITLE	VP
NAME	KIEFER, BRIAN J
STREET ADDRESS	5609 19TH ST W #A
CITY-ST-ZIP	BRADENTON, FL 34207
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000600976
01/26/07-80031-013 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Paul Kiefer

**PAUL KIEFER
PRES.**

1-21-07

9417207879

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #