

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000122572

1. Entity Name
C & C ELECTRIC SERVICES, INC.



Principal Place of Business
3672 ATLANTIC ST.
BIG PINE KEY, FL 33043

Mailing Address
3672 ATLANTIC ST.
BIG PINE KEY, FL 33043



03112005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
56-2413238

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WILLIAMS, CHRISTINE
3672 ATLANTIC ST.
BIG PINE KEY, FL 33043

**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's 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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

PD
WILLIAMS, CRAIG
3672 ATLANTIC ST.
BIG PINE KEY, FL 33043

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

VD
WILLIAMS, CHRISTINE
3672 ATLANTIC ST.
BIG PINE KEY, FL 33043

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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UN0000274937
03/24/05-80031-016 150.00

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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:

Christine Williams
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHRISTINE
WILLIAMS

3/20/05

Date

305-872-1147

Daytime Phone #