


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000124624

1. Entity Name
JACK MORTON ELECTRICAL CONTRACTOR, INC.



| | |
|---|---|
| Principal Place of Business 401 ROYCE ST PENSACOLA, FL 32503 | Mailing Address 401 ROYCE ST PENSACOLA, FL 32503 |
|---|---|

DO NOT WRITE IN THIS SPACE



02152005 No Chg-P CR2E034 (10/03)

| | |
|---|--|
| 4. FEI Number 56-2410493 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required | |

6. Name and Address of Current Registered Agent

**MORTON, JACK
 401 ROYCE ST
 PENSACOLA, FL 32503**

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 _____ (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. <input type="checkbox"/> \$5.00 May Be Added to Fees |
|--|---|

10. OFFICERS AND DIRECTORS

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P MORTON, JACK 401 ROYCE ST PENSACOLA, FL 32503 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | O TIMMONS, PORTER L 5655 N 9TH AVE, BUILDING C APT 23 PENSACOLA, FL 32504 |
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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: *Porter Timmons* **Porter Timmons** **02-25-05** **850.3932913**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #