


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

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

DOCUMENT # P03000126632 1. Entity Name PLEDGER ELECTRICAL, HEATING AND AIR, INC.	
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Principal Place of Business 399 HWY 73 MARIANNA, FL 32448 US	Mailing Address 399 HWY 73 MARIANNA, FL 32448 US
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DO NOT WRITE IN THIS SPACE



02142005 No Chg-P CR2E034 (10/03)

4. FEI Number 20-0384186	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

C. SHA'RON JAMES
2629 BLAIR STONE ROAD
TALLAHASSEE, FL 32301

**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 C. Sha'Ron James

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, 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	P PLEDGER, CHARLES E 399 HWY 73 MARIANNA, FL 32448
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PLEDGER, BARBARA C 399 HWY 73 MARIANNA, FL 32448
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PLEDGER, CHARLES A 399 HWY 73 MARIANNA, FL 32448
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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1000000240690
02/24/05-R0013-017 150.00

**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: Barbara C. Pledger

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-22-05 850-487-9620

Date

Daytime Phone #