

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000126632

1. Entity Name

PLEDGER ELECTRICAL, HEATING AND AIR, INC.



Principal Place of Business

399 HWY 73
MARIANNA, FL 32448 US

Mailing Address

399 HWY 73
MARIANNA, FL 32448 US



01102006

No Chg-P

CR2E034 (11/05)

4. FEI Number

20-0384186

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

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

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, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	PLEDGER, CHARLES E
STREET ADDRESS	399 HWY 73
CITY-ST-ZIP	MARIANNA, FL 32448
TITLE	VP
NAME	PLEDGER, BARBARA C
STREET ADDRESS	399 HWY 73
CITY-ST-ZIP	MARIANNA, FL 32448
TITLE	VP
NAME	PLEDGER, CHARLES A
STREET ADDRESS	399 HWY 73
CITY-ST-ZIP	MARIANNA, FL 32448
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/06/06-80007-016 150.00

**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:

Barbara C Pledger

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/06 *850-482-9620*

Date

Daytime Phone #