

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Feb 08, 2006 08:00 AM
Secretary of State**

DOCUMENT # P03000127937

1. Entity Name
JAMES R. LEE ELECTRIC SERVICE, INC.



Principal Place of Business
**204 SHERMAN AVE
PANAMA CITY, FL 32401**

Mailing Address
**5100 BAYHEAD RD
YOUNGSTOWN, FL 32466**



01182006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

| | |
|--|---------------------------------------|
| 4. FEI Number 20-0365009 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

**LEE, JAMES R
5100 BAYHEAD RD
YOUNGSTOWN, FL 32466**

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

**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

000000425241
02/18/06-80085-017 158.75

10. OFFICERS AND DIRECTORS

TITLE PS
NAME LEE, JAMES R
STREET ADDRESS 5100 BAYHEAD RD
CITY-ST-ZIP YOUNGSTOWN, FL 32466

TITLE VT
NAME LEE, RONNIE J
STREET ADDRESS 5100 BAYHEAD RD
CITY-ST-ZIP YOUNGSTOWN, FL 32466

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CITY-ST-ZIP

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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: *James R Lee* PRESIDENT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/5/06 850-722-1924
Date Daytime Phone #

JAMES R LEE