

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 10, 2006 8:00 am
Secretary of State

02-10-2006 90024 025 ***150.00

DOCUMENT # P03000145903

1. Entity Name

LEHMKUHL ELECTRIC, INC.



Principal Place of Business

3530 36TH ST NO
SAINT PETERSBURG FL 33713

Mailing Address

3530 36TH ST NO
SAINT PETERSBURG FL 33713

2. Principal Place of Business

5200 28th St No 343
Suite, Apt. #, etc. 343

3. Mailing Address

5200 28th St No 343
Suite, Apt. #, etc. 343

City & State

St. Petersburg, FL

City & State

St. Petersburg, Fla

Zip

33714

Country

US

Zip

33714

Country

US

4. FEI Number

52-2436676

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E034 (10/05)



6. Name and Address of Current Registered Agent

LEHMKUHL, ROGER
3530 36TH ST NO
SAINT PETERSBURG FL 33713

7. Name and Address of New Registered Agent

Name Roger Lehmkuhl

Street Address (P.O. Box Number is Not Acceptable)

5200 28th St No #343

City St. Petersburg

FL

Zip Code 33714

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

Roger Lehmkuhl

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

(NOTE: Registered Agent signature required when reinstating)

1/28/06

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing

Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☒ Delete
NAME LEHMKUHL, ROGER
STREET ADDRESS 3530 36TH ST NO
CITY-ST-ZIP SAINT PETERSBURG FL 33713

TITLE D ☐ Delete
NAME LEHMKUHL, Roger
STREET ADDRESS 5200 28th St No #343
CITY-ST-ZIP St. Petersburg, Fla 33714

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/28/06