## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000148242

Entity Name: CONNER ELECTRIC, INC.

FILED Feb 17, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

490 SW MCFARLANE AVE. 1198 SW LAKE MONTGOMERY AVE. LAKE CITY, FL 32025

LAKE CITY, FL 32025

**Current Mailing Address: New Mailing Address:** 

490 SW MCFARLANE AVE. 1198 SW LAKE MONTGOMERY AVE.

LAKE CITY, FL 32025 LAKE CITY, FL 32025

FEI Number: 56-2419067 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

CONNER, MICHAEL S CONNER, MICHAEL S 1198 SW LAKE MONTGOMERY AVE. 490 SW MCFARLANE AVE.

LAKE CITY, FL 32025 LAKE CITY, FL 32025

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.

SIGNATURE: MICHAEL S. CONNER 02/17/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

CONNER, MICHAEL CONNER, MICHAEL Name: Name:

1400 LAKE MONTGOMERY DR 1198 SW LAKE MONTGOMERY AVE. Address: Address:

City-St-Zip: LAKE CITY, FL 32025 City-St-Zip: LAKE CITY, FL 32025

Title: (X) Change ( ) Addition Title: () Delete

CONNER, CHAD Name: CONNER, GERALD Name:

1400 LAKE MONTGOMERY DR 1198 SW LAKE MONTGOMERY AVE. Address: Address:

LAKE CITY, FL 32025 LAKE CITY, FL 32025 City-St-Zip: City-St-Zip:

( ) Delete Title: Title: (X) Change ( ) Addition

CONNER, JASON Name: CONNER, JASON Name:

1400 LAKE MONTGOMERY DR 1198 SW LAKE MONTGOMERY AVE. Address: Address:

City-St-Zip: LAKE CITY, FL 32025 City-St-Zip: LAKE CITY, FL 32025

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: MICHAEL S. CONNER 02/17/2005