

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 27, 2006 8:00 am
Secretary of State

DOCUMENT # P04000003005

1. Entity Name

MARSHALL ELECTRIC INC.

03-27-2006 90279 025 ***158.75

Principal Place of Business

1320 W. SMITH STREET
ORLANDO FL 32804

Mailing Address

1320 W. SMITH STREET
ORLANDO FL 32804

50006176



2. Principal Place of Business

248 Trish Drive

Suite, Apt. #, etc.

3. Mailing Address

248 Trish Drive

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/05)

City & State

Crestview, Florida

Zip 32536

Country USA

City & State

Crestview, Florida

Zip 32536

Country USA

4. FEI Number

80-0082418

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MARSHALL, DONNA A
1320 W. SMITH STREET
ORLANDO FL 32804

7. Name and Address of New Registered Agent

Name

Marshall, Donna A

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

248 Trish Drive

City

Crestview

FL

Zip Code

32536

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, if applicable,

(NOTE: Registered Agent signature required when consolidating)

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	P	<input type="checkbox"/> Delete
NAME	MARSHALL, ERIC	
STREET ADDRESS	1320 W. SMITH STREET	
CITY-ST-ZIP	ORLANDO FL 32804	
TITLE	S	<input type="checkbox"/> Delete
NAME	MARSHALL, DONNA	
STREET ADDRESS	1320 W. SMITH STREET	
CITY-ST-ZIP	ORLANDO FL 32804	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Eric, Marshall	
STREET ADDRESS	248 Trish Drive	
CITY-ST-ZIP	Crestview, FL 32536	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Donna Marshall	
STREET ADDRESS	248 Trish Drive	
CITY-ST-ZIP	Crestview, FL 32536	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: Donna Marshall Donna Marshall 3/16/06 850 682-0836