


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 25, 2005 8:00 am
Secretary of State

04-26-2005 90170 036 ***150.00

DOCUMENT # P04000011606	
1. Entity Name DAVID T. COOK MASTER ELECTRICIAN, INC.	

Principal Place of Business 1200 BIG TREE RD. NEPTUNE BEACH, FL 32266	Mailing Address 1200 BIG TREE RD. NEPTUNE BEACH, FL 32266
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2. Principal Place of Business 2734 ST. LOUIS CT Suite, Apt. #, etc.	3. Mailing Address 2734 ST. LOUIS CT. Suite, Apt. #, etc.
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City & State PONTE VEDRA FL.	City & State PONTE VEDRA FL.	4. FEI Number 03-0534766	Applied For <input type="checkbox"/> Not Applicable
Zip 32082	Country USA	Zip 32082	Country USA

04182005 Chg-P CR2E034 (10/03)

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent COOK, DAVID T 1200 BIG TREE RD. NEPTUNE BEACH, FL 32266	
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7. Name and Address of New Registered Agent Name COOK DAVID T. Street Address (P.O. Box Number is Not Acceptable) 2734 ST. LOUIS CT. City & State PONTE VEDRA FL Zip Code 32082	
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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 David T. Cook DATE 4-25-05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST COOK, DAVID T 1200 BIG TREE RD. NEPTUNE BEACH, FL 32266 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST COOK, DAVID T. 2734 ST. LOUIS CT. PONTE VEDRA, FL 32082 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: David T. Cook DATE 4-25-05 877-203-2360
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR