


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 30, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000011606 1. Entity Name DAVID T. COOK MASTER ELECTRICIAN, INC.	
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Principal Place of Business 2734 ST LOUIS CT PONTE VEDRA BEACH, FL 32082	Mailing Address 2734 ST LOUIS CT PONTE VEDRA BEACH, FL 32082
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05112006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 03-0534766	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**COOK, DAVID T
2734 ST LOUIS CT
PONTE VEDRA BEACH, FL 32082**

**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 _____

**FILE NOW!!! - FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST COOK, DAVID T 2734 ST LOUIS CT PONTE VEDRA BEACH, FL 32082
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08/30/06-80006-014 150.00

**DO NOT WRITE
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: *David T Cook* **8-26-06**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR _____ Date _____ Daytime Phone # _____