

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000089245

FILED
Apr 30, 2008
Secretary of State

Entity Name: ALL FLORIDA POWER SYSTEMS, INCORPORATED

Current Principal Place of Business:

954 SHADICK DRIVE
ORANGE CITY, FL 32763

New Principal Place of Business:

3074 MAPLESHADE ST.
DELTONA, FL 32738

Current Mailing Address:

P.O. BOX 740062
ORANGE CITY, FL 32774

New Mailing Address:

3074 MAPLESHADE ST.
DELTONA, FL 32738

FEI Number: 06-1778993

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEAPE, STEVEN
3074 MAPLESHADE STREET
DELTONA, FL 32738 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HEAPE, STEVEN
Address: 3074 MAPLESHADE STREET
City-St-Zip: DELTONA, FL 32738

Title: V () Delete
Name: DEESE, MICHAEL M
Address: 580 PHILLIPS ROAD
City-St-Zip: MIDWAY, GA 31320

Title: T () Delete
Name: HEAPE, STEVEN
Address: 3074 MAPLESHADE STREET
City-St-Zip: DELTONA, FL 32738

Title: S () Delete
Name: DEESE, MICHAEL M
Address: 580 PHILLIPS ROAD
City-St-Zip: MIDWAY, GA 31320

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HEAPE, STEVEN C
Address: 3074 MAPLESHADE STREET
City-St-Zip: DELTONA, FL 32738

Title: V (X) Change () Addition
Name: EVANS, ROBERT S
Address: 3086 BRANCHVILLE ST.
City-St-Zip: DELTONA, FL 32738

Title: T (X) Change () Addition
Name: HEAPE, STEVEN C
Address: 3074 MAPLESHADE STREET
City-St-Zip: DELTONA, FL 32738

Title: S (X) Change () Addition
Name: HUDSON, STACEY J
Address: 3074 MAPLESHADE ST.
City-St-Zip: DELTONA, FL 32738

Title: Q () Change (X) Addition
Name: DEESE, MICHAEL M
Address: 300 BRANTLEY DR.
City-St-Zip: HINESVILLE, GA 31313

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

SIGNATURE: STEVEN HEAPE

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date