2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000114689

Name:

Address:

City-St-Zip:

KESSLER, DOUGLAS

PALM SPRINGS, FL 33461

83 ANDROS ROAD

Entity Name: W.T. JONES ELECTRIC INC.

FILED Jan 06, 2006 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
	ONWOOD RE ACH, FL 3340				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	ONWOOD RE ACH, FL 3340				
FEI Number	: 20-1724498	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	Address of	Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
PALM BEA	ONWOOD RE ACH, FL 3340	84002 US	e purpose of changing its registered	d office or registered agent, or both,	
SIGNATU					
	Electro	nic Signature of Registered A	gent	Date	
Election Car	mpaign Financir	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	JONES, WILLI 744 BUTTONV) Delete AM T /OOD RD. NORTH FL 334084002	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	JURY, DOUG 13222 53RD C) Delete :T. L PALM BEACH, FL 33411	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	Т () Delete	Title:	() Change () Addition	

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

Name:

Address:

City-St-Zip:

SIGNATURE: W. T. JONES P 01/06/2006