

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000037553

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Entity Name:** CIRCUIT BREAKER SALES & SERVICE INC.

**Current Principal Place of Business:**

5385 GATEWAY BLVD., STE. 19-21  
LAKELAND, FL 33811

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 6130  
LAKELAND, FL 33807

**New Mailing Address:**

PO BOX 1557  
GAINESVILLE, TX 76241

**FEI Number:** 14-1924871

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PETERSON, SCOTT  
5385 GATEWAY BLVD.  
SUITES 19-21  
LAKELAND, FL 33811 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: SCHOFIELD, WILLIAM  
Address: 1315 COLUMBINE DRIVE  
City-St-Zip: GAINESVILLE, TX 76240

Title: D  
Name: LEDBETTER, FINLEY  
Address: 1315 COLUMBINE DR.  
City-St-Zip: GAINESVILLE, TX 76240

Title: D  
Name: KINNEY, RAY  
Address: 1315 COLUMBINE DR.  
City-St-Zip: GAINESVILLE, TX 76240

Title: P  
Name: PETERSON, SCOTT  
Address: 12857 EAST INDEPENDENCE, SUITE G  
City-St-Zip: MATTHEWS, NC 28105

I hereby 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 all other like empowered.

SIGNATURE: SCOTT PETERSON

D

01/04/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date