

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000104497

FILED  
May 09, 2008  
Secretary of State

Entity Name: WANERKA ELECTRIC OF FLORIDA, INC.

**Current Principal Place of Business:**

1093 A1A BEACH BLVD STE 219  
ST AUGUSTINE BEACH, FL 32080

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 350214  
PALM COAST, FL 32135

**New Mailing Address:**

FEI Number: 04-3822079

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WANERKA, JANICE  
1093 A1A BEACH BLVD. #219  
ST. AUGUSTINE BEACH, FL 32080 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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: WANERKA, JOHN  
Address: 1093 A1A BEACH BLVD STE 219  
City-St-Zip: ST AUGUSTINE BEACH, FL 32080

Title: DVST ( ) Delete  
Name: WANERKA, JANICE  
Address: 1093 A1A BEACH BLVD STE 219  
City-St-Zip: ST AUGUSTINE BEACH, FL 32080

Title: VP ( ) Delete  
Name: WANERKA, NICHOLAS  
Address: PO BOX 350188  
City-St-Zip: PALM COAST, FL 32135

Title: T ( ) Delete  
Name: WANERKA, ALYSSA  
Address: PO BOX 350188  
City-St-Zip: PALM COAST, FL 32135

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JANICE WANERKA

DVST

05/09/2008

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

\_\_\_\_\_  
Date