

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000002459

Entity Name: QUEEN ELECTRIC, INC.

FILED  
Jan 27, 2009  
Secretary of State

## Current Principal Place of Business:

2500 NW 10TH STREET  
SUITE 104  
OCALA, FL 34475

## New Principal Place of Business:

2500 NW 10TH STREET  
SUITE 102  
OCALA, FL 34475

## Current Mailing Address:

2500 NW 10TH STREET  
SUITE 104  
OCALA, FL 34475

## New Mailing Address:

2500 NW 10TH STREET  
SUITE 102  
OCALA, FL 34475

FEI Number: 26-1706045

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHLICHTER, JANE  
2500 NW 10TH STREET  
SUITE 104  
OCALA, FL 34475 US

## Name and Address of New Registered Agent:

SCHLICHTER, JANE  
2500 NW 10TH STREET  
SUITE 102  
OCALA, FL 34475 US

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:

01/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: SCHLICHTER, JANE  
Address: 2500 NW 10TH STREET, SUITE 104  
City-St-Zip: OCALA, FL 34475

Title: DS ( ) Delete  
Name: SCHLICHTER, MARK  
Address: 2500 NW 10TH STREET, SUITE 104  
City-St-Zip: OCALA, FL 34475

Title: DVP (X) Delete  
Name: SCHLICHTER, ERIN  
Address: 2500 NW 10TH STREET, SUITE 104  
City-St-Zip: OCALA, FL 34475

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition  
Name: SCHLICHTER, JANE  
Address: 2500 NW 10TH STREET, SUITE 102  
City-St-Zip: OCALA, FL 34475

Title: DVS (X) Change ( ) Addition  
Name: LEATHERS, ERIN  
Address: 2500 NW 10TH STREET, SUITE 102  
City-St-Zip: OCALA, FL 34475

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: JANE E SCHLICHTER

DPT

01/27/2009

Electronic Signature of Signing Officer or Director

Date