2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000051685

HEAPE, STEVÉN C JR.

DELTONA, FL 32738

3074 MAPLESHADE ST.

Name: Address:

City-St-Zip:

Entity Name: H & E ELECTRIC INC.

FILED Jul 07, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3074 MAPLESHADE ST. DELTONA, FL 32738 **Current Mailing Address: New Mailing Address:** 3074 MAPLESHADE ST. 3074 MAPLESHADE ST. DELTONA, FL 32738 US DELTONA, FL 32738 FEI Number: 26-2546341 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HEAPE, STEVEN C JR 3074 MAPLESHADE ST. DELTONA, FL 32738 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition HEAPE, STEVEN C JR. Name: Name: 3074 MAPLESHADE ST. Address: Address: City-St-Zip: DELTONA, FL 32738 City-St-Zip: () Delete Title: VΡ Title: () Change () Addition Name: EVANS, ROBERT Name: 3086 BRANCHVILLE DR. Address: Address: DELTONA, FL 32738 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition HUDSON, STACEY J Name: Name: 3074 MAPLESHADE ST. Address: Address: City-St-Zip: DELTONA, FL 32738 City-St-Zip: Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: STEVEN C. HEAPE JR. P 07/07/2009