

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000041819

**FILED**  
**Apr 08, 2011**  
**Secretary of State**

**Entity Name:** GUY BARRETTE ELECTRICAL CONTRACTOR OF VOLUSIA COUNTY INC

**Current Principal Place of Business:**

880 AIRPORT ROAD  
SUITE 109  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

**Current Mailing Address:**

880 AIRPORT ROAD  
SUITE 109  
ORMOND BEACH, FL 32174

**New Mailing Address:**

**FEI Number:** 27-2582847

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOGUIDICE, JOSEPH A  
1515 RIDGEWOOD AVE  
SUITE A  
HOLLY HILL, FL 32117 US

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

BELUS, MICHAEL  
3925 S. NOVA ROAD  
PORT ORANGE, FL 32127 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:** MICHAEL BELUS

04/08/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** BARRETTE, GUY A  
**Address:** 880 AIRPORT ROAD #109  
**City-St-Zip:** ORMOND BEACH, FL 32174

**Title:** VP  
**Name:** BARRETTE, JUDITH H  
**Address:** 880 AIRPORT ROAD #109  
**City-St-Zip:** ORMOND BEACH, FL 32174

**Title:** T  
**Name:** BARRETTE, IAN A  
**Address:** 880 AIRPORT ROAD #109  
**City-St-Zip:** ORMOND BEACH, FL 32174

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:** JUDITH H BARRETTE

VP

04/08/2011

Electronic Signature of Signing Officer or Director

Date