

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000001895

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: SPECIALIZED ELECTRONICS CONTRACTING, INC.

## Current Principal Place of Business:

13360 W COLONIAL DR SUITE #460  
WINTER GARDEN, FL 34787

## New Principal Place of Business:

13360 W COLONIAL DR.  
SUITE 460  
WINTER GARDEN, FL 34787

## Current Mailing Address:

13360 W COLONIAL DR SUITE #460  
WINTER GARDEN, FL 34787

## New Mailing Address:

13360 W COLONIAL DR.  
SUITE 460  
WINTER GARDEN, FL 34787

FEI Number: 59-3156719

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALLER, CHRISTOPHER S  
13360 W COLONIAL DR SUITE #460  
WINTER GARDEN, FL 34787 US

## Name and Address of New Registered Agent:

WALLER, CHRISTOPHER S  
13360 W COLONIAL DR.  
SUITE 460  
WINTER GARDEN, FL 34787 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: CHRISTOPHER S. WALLER

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WALLER, CHRISTOPHER S  
Address: 750 LAKE HIAWASSEE DR  
City-St-Zip: ORLANDO, FL 32835

Title: S (X) Delete  
Name: WALLER, KRISTI  
Address: 750 LAKE HIAWASSEE DR  
City-St-Zip: ORLANDO, FL 32835

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CHRISTOPHER S. WALLER

D

04/27/2009

Electronic Signature of Signing Officer or Director

Date