

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Sep 22, 2004 8:00 am
Secretary of State

09-22-2004 90001 034 ***158.75

DOCUMENT # P93000080845

1. Entity Name
CHELSEA ELECTRIC, INC.



Principal Place of Business

**122 FOREST HILL BLVD
WPB, FL 33405 US**

Mailing Address

**122 FOREST HILL BLVD
WPB, FL 33405 US**

same → 345 Dartmouth DR, Lake Worth, FL 33460



DO NOT WRITE IN THIS SPACE

09132004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0452794

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**STARR-CAMPBELL, WANDA
122 FOREST HILL BLVD
WPB, FL 33405**

*345 Dartmouth DR
Lake Worth, FL 33460*

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

Extended due to hurricane

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	CAMPBELL, RICHARD C
STREET ADDRESS	<i>122 FOREST HILL BLVD 345 Dartmouth DR.</i>
CITY - ST - ZIP	<i>WPB, FL 33405 Lake Worth, FL 33460</i>
TITLE	VP
NAME	STARR-CAMPBELL, WANDA
STREET ADDRESS	<i>122 FOREST HILL BLVD 345 Dartmouth DR</i>
CITY - ST - ZIP	<i>WPB, FL 33405 Lake Worth, FL 33460</i>
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Wanda Starr-Campbell

9/15/04 361/542-9948