

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 11, 2008 08:00 AM
Secretary of State

DOCUMENT # P94000043559

1. Entity Name
CONSOLIDATED POWER CONSULTANTS, INC.



Principal Place of Business
**11023 GATEWOOD DR.
SUITE 103
BRADENTON, FL 34211 US**

Mailing Address
**11023 GATEWOOD DR.
SUITE 103
BRADENTON, FL 34211 US**



01072008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0510976	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**MURRELL, FREDERICK J
11023 GATEWOOD DR.
SUITE 103
BRADENTON, FL 34211**

**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
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

000000823581
02/20/08-80048-005 150.00

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	MURRELL, FREDERICK J
STREET ADDRESS	1401 MANATEE AVE W STE 910 11023 GATEWOOD DR
CITY-ST-ZIP	BRADENTON, FL 34205 34211 #103

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

F. J. Murrell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6 Feb. 2008

Date

941 747 2630

Daytime Phone #