## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000025647

City-St-Zip:

Entity Name: LIGHTHOUSE ELECTRICAL CONTRACTORS, INC.

FILED Apr 08, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
2345 URB JACKSON	BAN RD NVILLE, FL 32210	US			
Current Mailing Address:			New Mailing Address:		
2345 URB JACKSON	BAN RD NVILLE, FL 32210	US			
FEI Number	:: 59-3301302 F	El Number Applied For()	FEI Number Not App	licable ( ) Certificate of Status Desired	( )
Name and	d Address of Curr	ent Registered Agent:	Name and	Address of New Registered Agent:	
2345 URB	RICHARD L BAN RD IVILLE, FL 32210	US			
	e named entity subr e of Florida.	nits this statement for the p	ourpose of changing i	ts registered office or registered agent, o	r both,
SIGNATU	RE:				
	Electronic S	ignature of Registered Age	ent	Date	
Election Ca	mpaign Financing Tru	st Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	DP () Dele GRAVES, RICHARD 5726 CEDAR PARK JACKSONVILLE, FL	L LANE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	( ) Dele	ete	Title: Name: Address: City-St-Zip:	VP ( ) Change (X) Addition GRAVES, LEE 2345 URBAN RD JACKSONVILLE, FL 32210	
Title: Name: Address: City-St-Zip:	( ) Dele	ete	Title: Name: Address: City-St-Zip:	S ( ) Change (X) Addition GRAVES, MARY 5726 CEDAR PARK LN JACKSONVILLE, FL 32210	
Title: Name:	( ) Dele	ete	Title: Name:	T ( ) Change (X) Addition HIRES, SUSAN 2345 LIRBAN PD	

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.

City-St-Zip:

SIGNATURE: RICHARD GRAVES P 04/08/2009

JACKSONVILLE, FL 32210