## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000067286

Address:

City-St-Zip:

Entity Name: J. MCDONALD ELECTRIC, INC

FILED Apr 14, 2005 Secretary of State

Littly Nai	He. J. WICDON	IALD ELECTRIC, INC.	
Current Principal Place of Business:			New Principal Place of Business:
	O O LAKES BLV AKES, FL 3463!		2445 MERCHANT AVE. SUITE A ODESSA, FL 33556 US
Current M	ailing Address	<b>:</b> :	New Mailing Address:
	O O' LAKES BLV AKES, FL 3463		2445 MERCHANT AVE. SUITE A ODESSA, FL 33556 US
FEI Number:	59-3333375	FEI Number Applied For ( )	FEI Number Not Applicable ( ) Certificate of Status Desired ( )
Name and	Address of Cu	urrent Registered Agent	t: Name and Address of New Registered Agent:
3482 BLAC SPRING H	LD, JOSEPH CK OAK TRAIL IILL, FL 34604	US	
	named entity รเ e of Florida.	ubmits this statement for t	the purpose of changing its registered office or registered agent, or both,
SIGNATUR	RE:		
	Electronic	c Signature of Registered	Agent Date
Election Can	npaign Financing	Trust Fund Contribution ( ).	
OFFICERS	S AND DIRECT	ORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	PD () E MCDONALD, JOS 3482 BLACK OAI SPRING HILL, FL	K TRAIL	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	STD () E MCDONALD, CIN 3482 BLACK OAI SPRING HILL, FL	K TRAIL	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	MCDONALD, ALE	DOW WAY APT. 1034	Title: V (X) Change ( ) Addition Name: MCDONALD, ALENA S Address: 10127 BEDFORD RD. City-St-Zip: SPRING HILL, FL 34608
Title:	( )	Delete	Title: V ( ) Change (X) Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Address:

City-St-Zip:

4220 MAST CT. LAND O LAKES, FL 34639

SIGNATURE: ALENA MCDONALD V 04/14/2005