

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000067286

FILED
Apr 28, 2009
Secretary of State

Entity Name: J. MCDONALD ELECTRIC, INC.

Current Principal Place of Business:

2445 MERCHANT AVE.
SUITE A
ODESSA, FL 33556 US

New Principal Place of Business:

2246 DESTINY WAY
ODESSA, FL 33556 US

Current Mailing Address:

2445 MERCHANT AVE.
SUITE A
ODESSA, FL 33556 US

New Mailing Address:

2246 DESTINY WAY
ODESSA, FL 33556 US

FEI Number: 59-3333375

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCDONALD, JOSEPH
3482 BLACK OAK TRAIL
SPRING HILL, FL 34604 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCDONALD, JOSEPH
Address: 3482 BLACK OAK TRAIL
City-St-Zip: SPRING HILL, FL 34604

Title: STD () Delete
Name: MCDONALD, CINDY R
Address: 3482 BLACK OAK TRAIL
City-St-Zip: SPRING HILL, FL 34604

Title: V () Delete
Name: SEPULVEDA, ALENA S
Address: 10127 BEDFORD RD.
City-St-Zip: SPRING HILL, FL 34608

Title: V () Delete
Name: MCDONALD, JOHN
Address: 4220 MAST CT.
City-St-Zip: LAND O LAKES, FL 34639

Title: V () Delete
Name: MCDONALD, LINDSEY T
Address: 5203 WOODRIDGE LANE
City-St-Zip: SPRING HILL, FL 34609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOSEPH MCDONALD

PD

04/28/2009

Electronic Signature of Signing Officer or Director

Date