2005 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 13, 2005 08:00 AM **Secretary of State** DOCUMENT # P95000079571 1. Entity Name HORTON ELECTRICAL CONTRACTING, INC. Principal Place of Business _ Mailing Address 2402 SWAN STREET 2402 SWAN STREET JACKSONVILLE, FL 32204 JACKSONVILLE, FL 32204 01112005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3341943 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HORTON, JERRY DO NOT WRITE 16344 WATERVILLE ROAD JACKSONVILLE, FL 32226 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution, Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. D TITLE HORTON, JERRY W NAME 16344 WATERVILLE RD STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32226 11000000179624 01/13/05-80024-024 150.00 HORTON, JOEL B SR. NAME RT 1 BOX 491B STREET ADDRESS CITY-ST-ZIP BRYCEVILLE, FL 32009 HORTON, RANDY K NAME STREET ADDRESS 5677 SWALLOWFORK AVE DO NOT WRITE CITY-ST-ZIP CALLAHAN, FL 32011 IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SY-ZIP NAME STREET ADDRESS

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 cath, that I am an officer or director of the corporation or the effectiver or trustee employered 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 attact/ment with an addressywith all other like empowered.

SIGNATURE:

AGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-11-05 1-904-387-9933

Daytime Phone #

FILED