

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000013686

FILED
Aug 24, 2005
Secretary of State

Entity Name: LAFRANCE ELECTRICAL SERVICES, INC.

Current Principal Place of Business:

POST OFFICE BOX 4319
OCALA, FL 34478

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 4319
OCALA, FL 34478

New Mailing Address:

FEI Number: 59-3427749

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAFRANCE, PAUL N
4710 NORTH EAST 12TH STREET
OCALA, FL 34470 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: P () Delete
Name: LAFRANCE, PAUL N
Address: 4710 NE 12TH ST
City-St-Zip: OCALA, FL 34470

Title: V () Delete
Name: LAFRANCE, DONNA M.
Address: 4710 NE 12TH ST
City-St-Zip: OCALA, FL 34470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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.

SIGNATURE: DONNA LAFRANCE

V

08/24/2005

Electronic Signature of Signing Officer or Director

Date