2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000052184

1. Entity Name
CARTER'S ELECTRICAL & PROPERTY SERVICE, CO.

Principal Place of Business	Mailing Address
5901 COVE DRIVE	5901 COVE DRIVE
ORLANDO, FL 32812	ORLANDO, FL 32812

DO NOT WRITE IN THIS SPACE

01042006   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
59-3451716	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CARTER, RICHARD D
5901 COVE DRIVE
ORLANDO, FL 32812

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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 _____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	SDTP
NAME	CARTER, RICHARD D
STREET ADDRESS	5901 COVE DRIVE
CITY-ST-ZIP	ORLANDO, FL 32812

TITLE	V
NAME	CARTER, AARON D
STREET ADDRESS	4279 TIDEWATER
CITY-ST-ZIP	ORLANDO, FL 32812

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/11/06-80029-013 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Richard D. Carter*   RICHARD D. CARTER PRESIDENT 1-6-06   321 276 5777

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #