2006 FOR PROFIT CORPORATION

ANNUAL REPORT				Apr 28, 2006 08:00 Alv		
DOCU	MENT # P970000856		`	Secre	tary of State	
RICHARD S. KASTNER ELECTRICAL CONTRACTOR, INC.						
Principal Pla	ce of Business	Mailing Address				
16544 KERRY HILLS LANE 16		16544 KERRY HILLS LANE				
SPRING HIL	L, FL 34610	SPRING HILL, FL 34610				
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	O NOT WRITE	N THIS SPA	CE	4. FEI Numb 59-347		Applied For Not Applicat
					of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current Reg	istered Agent		· · · · · · · · · · · · · · · · · · ·	-	
KASTNES	R, RICHARD S SR.					
16544 KERRY HILLS LANE				UU	NOT W	KIIE
SPRING HILL, FL 34610				INI "	THIS SF	DACE
				, PX <u>V.</u> ,		AOL
	named entity submits this statement for the	purpose of changing its registere	ed office or registere	ed agent, or bo	oth, in the State of Fic	orida. I am familiar with, and accep
the obliga	tions of registered agent.					
SIGNATURE.	Signature. Typed or printed name of registered agent and till	e it applicable (NOTE: Registered	d Agent signature required s	ohen reinstelling)		DATE
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Fina. Trust Fund Contribution.			icing \$5.0	0 May Be d to Fees		
10.	OFFICERS AND DIRE	CTORS	<u> </u>		· .	
33117	PSTV]		. U0001	00541462
NAME	KASTNER, RICHARD S SR.	-	•			6-80059-019 150.0
STREET ADDRESS CITY-ST-ZIP	16544 KERRY HILLS LANE SPRING HILL, FL 34610	-	(,,,
	VAS					
TITLE NAME	KASTNER, RICHARD S JR				,,	
STREET ADDRESS	4203 SWEETBAY COURT	· 1				
CITY-ST-ZIP	SPRING HILL, FL 34607	_	,			
TITLE	VPS	-			*	
NAME	KASTNER, ESTHER M	_	. 1			
STREET ADDRESS	16544 KERRY HILLS LANE			DO	NOT W	DITE
CITY-ST-ZIP	SPRING HILL, FL 34610					
TITLE				IN 7	THIS SP	ACE
NAME CTREET ADDRESS				,		- 10
CITY-ST-ZIP						
THE						
NAME						
STREET ADDRESS	-		ł			
CAY-SI-IN						
TITLE						

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 cath; 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: 土

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED ON PRINTED WARE OF SIGNING OFFICER OR DIRECTOR