

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000071955

**FILED**  
**Feb 23, 2011**  
**Secretary of State**

**Entity Name:** A.M.P. ELECTRIC OF COLLIER COUNTY, INC.

**Current Principal Place of Business:**

6001 LAKE TRAFFORD RD.  
IMMOKALEE, FL 34142

**New Principal Place of Business:**

**Current Mailing Address:**

1760 PANTERA LANE  
NAPLES, FL 34120

**New Mailing Address:**

**FEI Number:** 59-3534756

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

OLESKY, EDWARD R  
6001 LAKE TRAFFORD RD.  
IMMOKALEE, FL 34142 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

**OFFICERS AND DIRECTORS:**

Title: PS  
Name: SANCHEZ, EDDIE  
Address: 6001 LAKE TRAFFORD RD.  
City-St-Zip: IMMOKALEE, FL 34142

Title: VPT  
Name: OLESKY, EDWARD R  
Address: 6001 LAKE TRAFFORD RD.  
City-St-Zip: IMMOKALEE, FL 34142

I hereby 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 all other like empowered.

SIGNATURE: EDDIE SANCHEZ

PS

02/23/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date