## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P98000085926**

1. Entity Name

HOBE SOUND ELECTRIC, INC.



FILED Feb 25, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

9406 S.E. MERCURY STREET HOBE SOUND, FL 33455 P.O. BOX 1245 HOBE SOUND, FL 33475



DO NOT WRITE IN THIS SPACE

01052008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0868378

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SCHLEMMER, JACI 9406 S.E. MERCURY STREET HOBE SOUND, FL 33455

## DO NOT WRITE IN THIS SPACE

				114	THIO OF AUL
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				e required when reinstating)	DATE
FILE NOWILL FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Fina Trust Fund Contribution.			ncing	\$5.00 May Be Added to Fees	U00000839402 03/06/08-80005-024 150.00
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SCHLEMMER, JACI P.O. BOX 1245 HOBE SOUND, FL 33455				
TITLE	Р		ł		
NAME	SCHLEMMER, MARK				
STREET ADDRESS CITY-ST-ZIP	P.O. BOX 1245		i		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	HOBE SOUND, FL 33475		DO NOT WRITE		
TITLE				IN '	THIS SPACE
NAME				117	THIS STACE
STREET ADDRESS			1		
CITY-ST-ZIP					
IUITE					
NAME Street address					
CITY-ST-ZIP					
			-		
TITLE NAME			Į.		
STREET ADDRESS					

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:** 

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED HAME OF BIGNING OFFICER OR DIRECTOR

2/19/08

772-341-4827

Daytime Phone #