

# **2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P99000080098

Entity Name: SELECTRIC, INC.

**FILED**  
**Apr 14, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

26149 COPIAPO CIRCLE  
PUNTA GORDA, FL 33983

**New Principal Place of Business:**

**Current Mailing Address:**

26149 COPIAPO CIRCLE  
PUNTA GORDA, FL 33983

**New Mailing Address:**

FEI Number: 59-3594795

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SECKER, CHARLES S  
26149 COPIAPO CIRCLE  
PUNTA GORDA, FL 33983 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: PTDS ( ) Delete  
Name: SECKER, CHARLES S  
Address: 26149 COPIAPO CIRCLE  
City-St-Zip: PUNTA GORDA, FL 33983

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CHARLES S. SECKER

PTDS

04/14/2008

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

\_\_\_\_\_  
Date