

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S25382

FILED  
Feb 09, 2009  
Secretary of State

Entity Name: GREG WILLIAMS ELECTRIC COMPANY, INC.

**Current Principal Place of Business:**

3301 BILL METZGER LANE  
PENSACOLA, FL 32514 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 3288  
PENSACOLA, FL 32516 US

**New Mailing Address:**

FEI Number: 59-3041693

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GOFF, LARRY B  
528 EVENTIDE DRIVE  
GULF BREEZE, FL 32561 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: WILLIAMS, MARK G PRES  
Address: 7524 STAGECOACH RD  
City-St-Zip: PENSACOLA, FL 32526

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

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

Title: ST ( ) Change (X) Addition  
Name: GOFF, LARRY B  
Address: 528 EVENTIDE DR  
City-St-Zip: GULF BREEZE, FL 32561

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: LARRY B GOFF

ST

02/09/2009

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

\_\_\_\_\_  
Date