


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 28, 2005 8:00 am
Secretary of State

07-07-2005 90009 045 ***158.75
07-28-2005 90003 036 ***400.00

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DOCUMENT # S51370			
1. Entity Name TAMPA ELECTRICAL CONTRACTING HEADQUARTERS, INC.			
Principal Place of Business 11722 FOREST HILLS DR TAMPA, FL 33612 US		Mailing Address PO BOX 82113 TAMPA, FL 33682-2113 US	
2. Principal Place of Business 1324 ECKLES DR		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State TAMPA FL		City & State	
Zip 33612		Country USA	
4. FEI Number 59-3065179		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent HOLLAND, WILLIAM M., JR. 4815 E. BUSCH BLVD SUITE 101 TAMPA, FL 33617		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1725 E. 8th AVE. City TAMPA FL Zip Code 33605	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when re-registering)</small>			
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WEBSTER, EDWIN F., JR. 11722 FOREST HILLS DRIVE TAMPA, FL 33612 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1324 ECKLES DR
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDTS WEBSTER, AUDREY P. 11722 FOREST HILLS DRIVE TAMPA, FL 33612 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1324 ECKLES DR
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Audrey P Webster		Date: 7/1/05 Daytime Phone #: 813-935-4726	