## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# S64012

FILED Jan 17, 2009 Secretary of State

Entity Name: WILLIAM STEPHEN LAPERE ELECTRICAL SERVICES, INC.

Current Principal Place of Business:		New Principal Place of Business:		
2750 NE 2	3RD PL 3 BCH, FL 330	n62		
	0 0011, 1 2 001	502		
Current Mailing Address:		New Mailing Address:		
2750 NE 2 POMPAN	23RD PL O BCH, FL 33(	062		
FEI Number	: 65-0267731	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:
2750 NE 2	PAMELA S. 23RD PL D BCH, FL 330	062 US		
	e named entity : e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
	e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
n the Stat	e of Florida. RE:	submits this statement for the		ed office or registered agent, or both,  Date
n the Stat SIGNATU	e of Florida.  RE: Electror			
n the Stat SIGNATU Election Ca	e of Florida.  RE: Electror	nic Signature of Registered Ag g Trust Fund Contribution().	ent	
n the Stat SIGNATU Election Ca	e of Florida.  RE: Electror  mpaign Financing  S AND DIREC	nic Signature of Registered Ag g Trust Fund Contribution ( ). TORS: ) Delete ELA S., PL	ent	Date
n the Stat SIGNATU Election Ca OFFICER Fitle: Name: Address:	e of Florida.  RE:  Electror  mpaign Financin  S AND DIREC  DST ()  LAPERE, PAMI 2750 NE 23RD  POMPANO BCI	nic Signature of Registered Ag g Trust Fund Contribution ( ). TORS: ) Delete ELA S., PL H, FL 33062 ) Delete JAM S, PL	ent  ADDITIONS/CHANG  Title: Name: Address:	Date  ES TO OFFICERS AND DIRECTORS

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: WILLIAMSLAPERE DP 01/17/2009