

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 575399

**Entity Name:** ENERGY CONTROL CONSULTANTS, INC.**Current Principal Place of Business:**10220 W. STATE RD. 84.  
SUITE #9  
DAVIE, FL 33324**Current Mailing Address:**10220 W. STATE RD. 84.  
SUITE #9  
DAVIE, FL 33324**FEI Number:** 59-1882822**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**COMBS, R E  
10220 W. STATE RD. 84  
SUITE #9  
DAVIE, FL 33324 US*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**Officer/Director Detail :**Title CEO  
Name COMBS, R E  
Address 2091 S.W. 52ND WAY  
City-State-Zip: PLANTATION FLTitle SEC  
Name COMBS, J L  
Address 2091 S.W. 52ND WAY  
City-State-Zip: PLANTATION FLTitle PRESIDENT  
Name COMBS, JASON ASHLEY  
Address 2537 FLAMINGO LANE  
City-State-Zip: FORT LAUDERDALE FL 33312Title VP  
Name HAFFER, RENA LYNNE  
Address 1315 3RD ST. CIRCLE EAST  
City-State-Zip: PALMETTO FL 34221

*I hereby 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 all other like empowered.*

**SIGNATURE:** JUDITH L. COMBS

SEC/TRES

01/06/2020

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date