

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 575399

Entity Name: ENERGY CONTROL CONSULTANTS, INC.**Current Principal Place of Business:**300 S. PINE ISLAND ROAD
SUITE #309
PLANTATION, FL 33324**Current Mailing Address:**300 S. PLANTATION ROAD
SUITE #309
PLANTATION, FL 33324 US**FEI Number:** 59-1882822**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**COMBS, R E
300 S. PNE ISLAND ROAD
SUITE #309
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, RICHARD E
Address	2091 S.W. 52ND WAY
City-State-Zip:	PLANTATION FL 33317
Title	PRESIDENT
Name	COMBS, JASON ASHLEY
Address	2537 FLAMINGO LANE
City-State-Zip:	FORT LAUDERDALE FL 33312
Title	VP
Name	HAFER, RANDALL D
Address	2091 S.W. 52ND WAY
City-State-Zip:	PLANTATION FL 33317

Title	SEC
Name	COMBS, JUDITH L
Address	2091 S.W. 52ND WAY
City-State-Zip:	PLANTATION FL 33317
Title	VP, BUSINESS DEVELOPMENT
Name	HAFER, RENA LYNNE
Address	2091 S.W. 52ND WAY
City-State-Zip:	PLANTATION FL 33317

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**SECRETARY****01/11/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date