

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2000 8:00 am
Secretary of State

05-19-2000 90017 003 ***150.00

DOCUMENT # F98000005095

1. Entity Name

KENDALL ELECTRIC, INC. OF GEORGIA

Principal Place of Business

Mailing Address

2368 PINNACLE DR
 CLAYTON GA 30525
 US

2368 PINNACLE DR
 CLAYTON GA 30525
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

58-2356930

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GRIFFIN, RANDOLPH C
1823 E. GULF BEACH DR
ST GEORGE ISLAND FL 32328

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible
 City Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	CP <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CP GRIFFIN, VAN	NAME	
STREET ADDRESS	2368 PINNACLE DR	STREET ADDRESS	
CITY-ST-ZIP	CLAYTON GA 30525	CITY-ST-ZIP	
TITLE	VCV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VCV DICKS, HEARTSILL	NAME	
STREET ADDRESS	2368 PINNACLE DR	STREET ADDRESS	
CITY-ST-ZIP	CLAYTON GA 30525	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D CROUCH, LARRY	NAME	
STREET ADDRESS	2368 PINNACLE DR	STREET ADDRESS	
CITY-ST-ZIP	CLAYTON GA 30525	CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	S CROUCH, LARRY JR	NAME	
STREET ADDRESS	2368 PINNACLE DR	STREET ADDRESS	
CITY-ST-ZIP	CLAYTON GA 30525	CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TD WELCH, JANICE	NAME	
STREET ADDRESS	2368 PINNACLE DR	STREET ADDRESS	
CITY-ST-ZIP	CLAYTON GA 30525	CITY-ST-ZIP	
TITLE	CFO <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CFO WELCH, JANICE	NAME	
STREET ADDRESS	2368 PINNACLE DR	STREET ADDRESS	
CITY-ST-ZIP	CLAYTON GA 30525	CITY-ST-ZIP	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Janice Welch - Janice Welch, CFO*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04.28.00
 Date

770 983 1606
 Daytime Phone #

CR2E034 (9/99)