

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000090456

FILED
May 01, 2009
Secretary of State

Entity Name: WINTHROP ELECTRIC COMPANY

Current Principal Place of Business:

12824 SW 150 TERRACE
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

12824 SW 150 TERRACE
MIAMI, FL 33186

New Mailing Address:

FEI Number: 80-0277182

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REINER, SAMUEL B ESQ
ONE DATRAN CENTER 9200 S DADELAND BLVD
SUITE#901
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WINTHROP, ROBERT I
Address: 12824 SW 150 TERRACE
City-St-Zip: MIAMI, FL 33186 US

Title: VPT () Delete
Name: WALKER, D. L.
Address: 10794 S.W. 51ST DRIVE
City-St-Zip: MIAMI, FL 33165

Title: S (X) Delete
Name: WINTHROP, M.A.
Address: 5105 JOHNSON STREET
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP,T (X) Change () Addition
Name: WINTHROP, ROBIN E
Address: 12824 SW 150 TERRACE
City-St-Zip: MIAMI, FL 33186 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROBERT WINTHROP

PD

05/01/2009

Electronic Signature of Signing Officer or Director

Date