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May 05, 1999 8:00 am
Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 213019

1. Corporation Name
DONALDSON ELECTRIC COMPANY, INC.



Principal Place of Business	Mailing Address
VERNON RICHARD DONALDSON 10407 BESSENT RD NO. JACKSONVILLE FL 32218	VERNON RICHARD DONALDSON 10407 BESSENT RD NO. JACKSONVILLE FL 32218

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Donaldson Electric		26		06/14/1958	
22 Suite, Apt. #, etc. 3410 Winton Drive		27 Suite, Apt. #, etc.		4. FEI Number	
23 City & State Jacksonville, Florida		28 City & State		59-0832764	
24 Zip 32208		25 Country Duval		29	
		30		Applied For	
				Not Applicable	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
DONALDSON, V R 3410 WINTON DR JACKSONVILLE FL 32208				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				FL			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DONALDSON, VERNON R	1.2 NAME	
STREET ADDRESS	10407 BESSENT RD. N.	1.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	1.4 CITY-ST-ZIP	
TITLE	VDS	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SMITH, RAYMOND P	2.2 NAME	VP
STREET ADDRESS	11314 AMERICANA LANE	2.3 STREET ADDRESS	Joe M. Laws
CITY-ST-ZIP	JACKSONVILLE FL	2.4 CITY-ST-ZIP	Rt 8 Box 736-C Lake City, FL 32055
TITLE	SD	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DONALDSON, ELIZABETH J	3.2 NAME	S/T/D
STREET ADDRESS	10407 BESSENT RD. N.	3.3 STREET ADDRESS	DONALDSON, ELIZABETH J
CITY-ST-ZIP	JACKSONVILLE FL	3.4 CITY-ST-ZIP	10407 Bessett Rd. N Jacksonville, FL
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DONALDSON, TONI L	4.2 NAME	
STREET ADDRESS	10407 BESSENT RD. N.	4.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: V.R. Donaldson - PRESIDENT 4-27-99 - 904-757-7621
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)