2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) 248340

DOCUMENT # 1. Entity Name CROWN ELECTRIC, INC.



FILED Feb 14, 2003 8:00 am Secretary of State 02-14-2003 90183 015 ***150.00

				VE WE TO					
Principal Place of Business 2325 HIGHWAY #60 EAST BARTOW FL 33830 Mailing Address P.O.BOX 101 BARTOW FL 33830									
2. Principal Plac	ce of Business	3. Mailing Address				1 (8 848 1841 9:804) 648 9 444			
Suite, Apt. #,	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES Applied For				
City & State		City & State			4. FEI Number 59-0936600 Not Applicable				
Zip	Country Zip Coun		try	5. Certificate of Status Desired Sa.75 Additional Fee Required					
	6. Name and Address of Current	Registered Agent	Registered Agent		7. N	ame and Address of New Register	ed Agent		
	6. Name and Address of Commen			Name	TU W	IARK F ·		ļ	
LAUGENE	IOUN E			SMI	1H, P	ox Number is Not Acceptable)			
LAURENT,				Street Addres 225 E.	S (P.O. BO PARK	AVE.			
650 E. DAV				223 15.	IAI		 ,	Ì	
BARTOW F	L 33830			Ì			Tin Codo		
				City	T TTAT	TEC	FL 33853		
	named entity submits this statement for			LAK	E WAI	ant or both in the State of Florida.	am familiar with, a	nd accept	
8. The above of	named entity submits this statement for	or the purpose of char	nging its register	ed office or regis	stered ag	ent, or both, in the otate of the		1	
the obligation	ons of registered agent.	~ 1				2//	103	- 1	
	made Am	st.			_			\	
SIGNATURE _	Signature, typed or printed name of registered agen	nt and title if applicable.	(NOTE: Register	ed Agent signature requ	ired when re	einstating)	AIE		
							65.0	.	
FI	LE NOW!!! FEE IS \$150.00					9. Election Campaign Financing		May Be to Fees	
After	May 1, 2003 Fee will be \$550.00	,				Trust Fund Contribution.			
Make Check	Payable to Florida Department					DDITIONS/CHANGES TO OFFICERS	AND DIRECTORS	S IN 11	
10.	OFFICERS AN	D DIRECTORS	11		AL	DOMONS/CHANGES TO CLASS	☐ Change	Addition	9
TITLE	ST	☐ De	elete TIT	LE				_	9
NAME	Douberly, Kenneth E			MÉ					4
STREET ADDRESS	305 PEACE RIVER PARK RD.			REET ADDRESS					CR2E034 (10/02)
CITY-ST-ZIP	BARTOW FL 33830		Cit	ry-st-zip				Addition	汉
	P		elete	TLE			☐ Change	Mudition	Ö
TITLE	HUDDLESTON, MICHAEL		NA NA	ME					
NAME	475 PLUMOSA ST		ST	REET ADDRESS					ĺ
STREET ADDRESS	BARTOW FL 33830		CI	TY-ST-ZIP	_				_
CITY-ST-ZIP		□ De	elete Ti	TLE			Change		1
TITLE	VP RODRIGUEZ, DAVID L	_ U		AME					ĺ
NAME	5035 OLD HOMESTEAD ST		· S1	TREET ADDRESS					ĺ
STREET ADDRESS	LAKE WALES FL 33853		C	TY-ST-ZIP					1
CITY-ST-ZIP	LAKE WALLO I E GOODS		alote TI	TLE			Change	Addition	
TITLE		ں ب	61010	AME					
NAME	1			TREET ADDRESS					
STREET ADDRESS			С	ITY-ST-ZIP		<u> </u>			-
CITY-ST-ZIP			\	ITLE			Change	Addition	
TITLE			JOIGIC	IAME					1
NAME				TREET ADDRESS					1
STREET ADDRESS				CITY-ST-ZIP]
CITY-ST-ZIP				+			Change	Addition	
TITLE			Bullio	TITLE					-
NAME		% 3 3		NAME STREET ADDRESS					
STREET ADDRESS	; •			CITY-ST-ZIP	-	-			
CITY-ST-ZIP				111-91-41F		110 07/0VN Florido Ctotutos I fuel	her certify that the	information	1
12 I hereby	certify that the information supplied	with this filing does no	t qualify for the	exemption stated	in Section	on 1 19.07(3)(1), Florida Statules. Hum he legal effect as if made under oath	that I am an office	er or director	

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

SIGNATURE:

Daytime Phone #