


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 27, 2006 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # 273588 1. Entity Name MORGAN ELECTRIC COMPANY, INC. |  |
|---|---|

| | |
|--|--|
| Principal Place of Business 1238 CRATE DRIVE P O BOX 20028 TALLAHASSEE, FL 32316 US | Mailing Address P O BOX 20028 TALLAHASSEE, FL 32316 US |
|--|--|



01032006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

| | |
|--|---------------------------------------|
| 4. FEI Number 59-1022878 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$8.75 Additional Fee Required |

| |
|---|
| 6. Name and Address of Current Registered Agent MORGAN, PAUL H. JR. 1238 CRATE DRIVE TALLAHASSEE, FL 32304 |
|---|

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

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

| | |
|---|---|
| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
|---|---|

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PD MORGAN, PAUL H. JR. 1238 CRATE DR. TALLAHASSEE, FL |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VP INGRAM, WALTER W. JR 1238 CRATE DR. TALLAHASSEE, FL |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | STD MORGAN, PAUL III 1238 CRATE DR. TALLAHASSEE, FL |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |

1100000405085
02/07/06-80026-019 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Paul H. Morgan, Jr. **PAUL H. MORGAN, JR.** 1-6-06 850-576-8181
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #