2001 UNIFORM BUSINESS REPORT (UBR) **FILED** Jan 08, 2001 8:00 am Secretary of State **DOCUMENT # 353911** 1. Entity Name A & B ELECTRIC COMPANY, INC. 01-08-2001 90030 016 ***150.00 Mailing Address Principal Place of Business 3102 OVERLAND RD 3102 OVERLAND RD BUILDING D BUILDING D APOPKA FL 32703 APOPKA FL 32703 US HS 2. Principal Place of Business 3. Mailing Address = = ==== DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1284258 Not Applicable = Zip Country Country \$8.75 Additional П 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name AKERS.GREGORY W Street Address (P.O. Box Number is Not Acceptable) 3102 OVERLAND ROAD **BUILDING D** APOPKA FL 32703 City Zip Code FI 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution Added to Fees П Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12 11. CR2E034 (10/00) ☐ Addition ☐ Change ☐ Delete TITLE TITLE AKERS.GREGORY NAME NAME STREET ADDRESS 3102 OVERLAND RD, BUILDING D STREET ADDRESS CITY-ST-ZIP APOPKA FL 32703 CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE HAYES, MYRA D NAME NAME 3102 OVERLAND RD, BLDG. D STREET ADDRESS STREET ADDRESS APOPKA FL 32703 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE RICHE, DAVID C NAME NAME 3102 OVERLAND RD. BLDG. D STREET ADDRESS STREET ADDRESS CITY-ST-ZIP APOPKA FL 32703 CITY-ST-ZIP ☐ Addition ☐ Delete ☐ Change TITLE TITLE HAYES, MYRA D. NAME NAME STREET ADDRESS 3102 OVERLAND RD, BLDG. D STREET ADDRESS CITY-ST-ZIP APOPKA FL 32703 CITY-ST-ZiP ☐ Delete Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS **=** :::: CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition _ NAME NAME **=**, <u>;</u>, ,, STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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.

IRE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR