2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 411808

Address:

City-St-Zip:

700 NORTH MACARTHUR BLVD

SPRINGFIELD, IL 62702

Entity Name: OLSON ELECTRIC CO., INC.

FILED Mar 06, 2006 Secretary of State

,							
Current Principal Place of Business:			New Prince	New Principal Place of Business:			
	RCH STREET,), FL 32771	STE 1042					
Current Mailing Address:			New Maili	New Mailing Address:			
4200 CHURCH STREET, STE 1042 SANFORD, FL 32771				700 NORTH MACARTHUR BLVD SPRINGFIELD, IL 62702			
FEI Number: 59-1431621 FEI Number Applied For ()		FEI Number Not Applicable ()		Certificate of Status Desired ()			
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:			
The above in the State	TH PINE ISLAN ON, FL 33324 named entity s e of Florida.	D ROAD US ubmits this statement for the μ	ourpose of changing i	ts registered	d office or registered agent,	or both,	
SIGNATUR		c Signature of Registered Age	⊇nt		 Date		
Election Car		Trust Fund Contribution ().			Batte		
OFFICERS	S AND DIRECT	ORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	WEST, JAMES F	STREET, STE 1042	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	ALFORD, VICTO 304 NOTRE DAM		Title: Name: Address: City-St-Zip:	WILES, AAR 700 NORTH	(X) Change () Addition ION D MACARTHUR BLVD LD, IL 62702		
Title: Name: Address: City-St-Zip:	T () HINKLE, JOHN 700 NORTH MAC SPRINGFIELD, I		Title: Name: Address: City-St-Zip:	HINKLE, JOH 700 NORTH	(X) Change ()Addition HN R MACARTHUR BLVD LD, IL 62702		
Title: Name: Address: City-St-Zip:	D () LATIMORE, PAU 700 NORTH MAG SPRINGFIELD, I	CARTHUR BLVD	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name:	PD () EGIZII, ROBERT	Delete · W	Title: Name:		() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: JOHN R. HINKLE T 03/06/2006