FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

FILED

DOCUMENT # 433639 1. Entity Name PADGETT ELECTRIC CORPORATION DO NOT WRITE IN THIS SPACE					المقديات المادية			
					02 NOV - AM 8: 38 SECRETARY OF STATE TALLAH/SOCE. FLORIDA			
					585 1/2	Place of Business EAST MAIN STREET	3. Mailing Address PO BOX 575	
Suite, Apt. #, etc. Suite, Apt. #, etc.					DO NOT WRITE IN THIS SPACE			
PAHOK		City & State OKEECHOBEE FL			4. FEI Number 59-1531522	-		Applied For Not Applicable
Zip 33476	Country USA	^{Zip} 34973-0575	Coun USA		5. Certificate of Status Desired	Ø	Fee F	5 Additional Required
					7. Name and Address of Current	Registere	iegA t	nt
DO NOT WRITE IN THIS SPACE					, W ELLIS			
				Street Address (P.O. Box Number is Not Acceptable)				
IN INIO SPACE				1774 SE 41	1774 SE 4TH STREET			
				City OKEECH	HOBEE	FL	Zi	p Code 4974
8. The above	e named entity submits this statement for Signature, typed or preted name of registered agent an			ed office or register		ida.		
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) After May 1 Amended				e is \$150 00 s \$550.00 s \$61 25	10. Election Campaign Fina	incing		\$5.00 May Be Added to Fees
Make Check Payabi 11. OFFICERS AND DIRECTORS				partment of Stat	Control of the Contro	of Books and Street	WENNESS OF	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	HALL, W ELLIS (PD) 1774 SE 4TH STREET OKEECHOBEE FL 34974		NAME STREE	1.74	1,500,000	194		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TUCKER, JAMES B (VD) 12928 SE SUZANNE DRIVE HOBE SOUND FL 33455		TITLE NAME STREE CITY	TADORESS : 44-	the Company of the Co			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	HALL, DIANE R (STD) 1774 SE 4TH STREET OKEECHOBEE FL 34974		30 A 10 A	5 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	DO NOT V	VRI:	TE	
TITLE NAME STREET ADDRESS	·		TITLE NAME STREET	ADDRESS	IN THIS S	PAC	Ē	

NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the informati indicated on this report or supple of the corporation or the receive attachment with an addless, with toes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ccurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an

TITLE

TITLE

NAME

CITY ST ZIP

STREET ADDRESS

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DIANE R HALL SIGNING OFFICER OR DIRECTOR

10-28-02

561-924-7233 Daylime Phone ∉

CR2E034B (12/01)