

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT****FILED**  
**May 01, 2006 08:00 AM**  
**Secretary of State**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                              |                                                                                                                           |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|--|
| <b>DOCUMENT # 454989</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                              |                                          |  |
| 1. Entity Name<br><b>K-C ELECTRIC CO.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                              |                                                                                                                           |  |
| Principal Place of Business<br><b>702 E. REYNOLDS, ST.<br/>PLANT CITY, FL 33563</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                              | Mailing Address<br><b>702 E. REYNOLDS, ST.<br/>PLANT CITY, FL 33563 US</b>                                                |  |
| <b>DO NOT WRITE IN THIS SPACE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                              |                                                                                                                           |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                              | 04252008 No Chg-P CR2E034 (11/05)                                                                                         |  |
| 4. FEI Number<br><b>59-1538687</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                              | Applied For<br><input type="checkbox"/> Not Applicable                                                                    |  |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                              | <b>\$8.75</b> Additional Fee Required                                                                                     |  |
| 8. Name and Address of Current Registered Agent<br><br><b>KEN KELLER<br/>2006 COUNTRY CLUB COURT<br/>PLANT CITY, FL 33566</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                              | <b>DO NOT WRITE<br/>IN THIS SPACE</b>                                                                                     |  |
| 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                              |                                                                                                                           |  |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2006 Fee will be \$550.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                              | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be<br>Added to Fees |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                              | 1000000553994<br>05/15/06-80074-018 158.75                                                                                |  |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                              |                                                                                                                           |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | PD<br>KELLER, KEN<br>2006 COUNTRY CLUB DRIVE<br>PLANT CITY, FL 33566         |                                                                                                                           |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | STD<br>WALDEN, SELINDA B.<br>2006 COUNTRY CLUB DRIVE<br>PLANT CITY, FL 33566 |                                                                                                                           |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | VPD<br>BROCK, DUANE<br>350 HOWARD AVE.<br>LAKELAND, FL 33815                 |                                                                                                                           |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                              |                                                                                                                           |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                              |                                                                                                                           |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                              |                                                                                                                           |  |
| <b>DO NOT WRITE<br/>IN THIS SPACE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                              |                                                                                                                           |  |
| 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: <i>[Signature]</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                              | 4/25/06 813-7524598                                                                                                       |  |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR<br><i>Vice President</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                              | Date Daytime Phone #                                                                                                      |  |