## 2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 20, 2000 8:00 am Secretary of State **DOCUMENT # 512916** 1. Entity Name P. D. G. ELECTRIC COMPANY 03-20-2000 90008 050 \*\*\*158.75 Principal Place of Business Mailing Address 4421-12 STREET CT..EAST 4421-12 STREET CT..EAST BRADENTON FL 34203-0611 BRADENTON FL 34203 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number -76-0589276-57-/790 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) **526 EAST PARK AVENUE** TALLAHASSEE FL 32301 Zip Code City 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 DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Pavable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE Change ☐ Addition TITLE ☐ Delete BURGHARDT, PHILLIP L. NAME 4712 64 DRIVE WEST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL** ☐ Change ☐ Addition TITLE TITLE ☐ Delete BURHGARDT, BRAIN D. NAME STREET ADDRESS 4802 64 DRIVE W. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE BRADENTON FL ☐ Change Addition ☐ Delete TITLE TITLE MAUL, JOHN NAME NAME STREET ADDRESS STREET ADDRESS 2010 24TH AVE E. CITY-ST-ZIP CITY-ST-ZIP **BRANDENTON FL 32405** Change ☐ Addition ☐ Delete TITLE TITLE PENDERGRASS, TERRY

**HOUSTON TX 77056** 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.

NAME STREET ADDRESS

TITLE

NAME

NAME

Delete

☐ Delete

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

3423 29TH STREET EAST

1360 POST OAK BLVD., #2100

1360 POST OAK BLVD., #2100

**BRADENTON FL 34208** 

EASTMAN, BRAD

**HOUSTON TX 77056** 

JENSEN, DERRICK

**PLANNIFE** SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Change

Change

☐ Addition

Addition