2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Apr 23, 2007 08:00 Al Secretary of State **DOCUMENT # 526266** 1. Entity Name D & W ELECTRIC COMPANY, INC. Principal Place of Business Mailing Address 2601 PICKETTVILLE ROAD 2601 PICKETTVILLE ROAD P.O. BOX 37544 JACKSONVILLE FL 32236 P.O. BOX 37544 JACKSONVILLE FL 32236 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suito, Apt. #, etc. Suite, Apt. #, otc. 1st MOORE CR2E034 (10/06) 4. FEI Number 59-1727957 Applied For City & State City & State Not Applicable Zip Country Country \$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 CARTER, JANICE E. Street Address (P.O. Box Number is Not Acceptable) 311 SCENIC POINT LN **ORANGE PARK FL 32003** City Zip Codo 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 Signature, typed or printed name of registered agent and title i applicable. (NOTE: Registered Agent signature required when remistating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. ☐ Change ☐ Addition BHH Delete THEF CARTER, DANIEL L. U00000723834 NAME NAMI 311 SCENIC POINT LN. 05/02/07-80087-013 158.75 STRUET ADDRESS STILL LADORESS **ORANGE PARK FL 32003** CITY-ST-7IP CHY-ST-ZIP STD ☐ Change Addilion 🔲 HITE Detele 10116 CARTER, JANICE E. NAME NAM! 311 SCENIC POINT LN. STREET ADDRESS STREET ADDRESS **ORANGE PARK FL 32003** CHY-S1-ZIP CHY-SI-ZIP ☐ Change ☐ Delete THE. Addition NAME NAME STREET ADORESS SURLET ADDRESS CITY - ST- 718 CITY-ST-ZIP ☐ Change Addition Delete 10H1F NAMI NAME STRUCT ADDRESS STREET ADDRESS CITY ST-7IP CHY-SI-7IP ☐ Change ☐ Addition ☐ Delete THE TITLE NAM NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STRUET ADDRESS STREET ADDRESS CHY-SI-ZIP CHY-ST-7IP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Janue E. Carter 4-17-07 904-237-1881