2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Jan 08, 2007 08:00 AM **DOCUMENT #694269 Secretary of State** 1. Entity Name DESOTO ELECTRIC CORP. Principal Place of Business Mailing Address 2916 69TH ST EAST 2916 69TH ST EAST BRADENTON, FL 34208 BRADENTON, FL 34208 No Chg-P CR2E034 (11/05) 01042007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2104833 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HAWKINS, DOREEN J DO NOT WRITE 2916 69TH ST E BRADENTON, FL 34208 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME HASSELL, HELEN STREET ADDRESS 7105 36TH AVE EAST CITY-ST-ZIP BRADENTON, FL 34208 U00000577356 01/08/07-80013-011 150.00 TITLE NAME HAWKINS, DOREEN STREET ADDRESS 2916 69TH ST EAST CTTY-ST-ZIP BRADENTON, FL 34208 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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 affactingent with an address, with all other like empowered.

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

Doreen J. Hawkins

1/4/2007

(941)746-3668

Daytime Phone #