

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 848995 (7)
1. Corporation Name
ALL-PHASE ELECTRIC SUPPLY CO.

Principal Place of Business
875 RIVERVIEW DRIVE
BENTON HARBOR MI 49022

Mailing Address
875 RIVERVIEW DRIVE
BENTON HARBOR MI 49022



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/30/1981	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 38-1601183		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country	29 Country	7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

8. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		FL 85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VEGTER, WILLIAM C	1.2 NAME	
STREET ADDRESS	875 RIVERVIEW DRIVE	1.3 STREET ADDRESS	
CITY - ST - ZIP	BENTON HARBOR MI	1.4 CITY - ST - ZIP	
TITLE	CB	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KINNEY, RONALD F	2.2 NAME	
STREET ADDRESS	3401 S LAKESHORE DRIVE	2.3 STREET ADDRESS	
CITY - ST - ZIP	ST JOSEPH MI	2.4 CITY - ST - ZIP	
TITLE	VD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KINNEY, RICHARD M	3.2 NAME	
STREET ADDRESS	3401 S LAKESHORE DRIVE	3.3 STREET ADDRESS	
CITY - ST - ZIP	ST JOSEPH MI	3.4 CITY - ST - ZIP	
TITLE	SD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KINNEY, PATRICK J	4.2 NAME	
STREET ADDRESS	PO BOX 24, NA	4.3 STREET ADDRESS	
CITY - ST - ZIP	ST JOSEPH MI	4.4 CITY - ST - ZIP	
TITLE	P	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RENWICK, WILLIAM K	5.2 NAME	
STREET ADDRESS	3401 S LAKESHORE DRIVE	5.3 STREET ADDRESS	
CITY - ST - ZIP	ST JOSEPH MI	5.4 CITY - ST - ZIP	
TITLE	VD	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KINNEY, STEPHEN	6.2 NAME	
STREET ADDRESS	3401 LAKESHORE DRIVE	6.3 STREET ADDRESS	
CITY - ST - ZIP	ST. JOSEPH MI	6.4 CITY - ST - ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: 

CR2E034 (10/97)