2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 856673

FILED
May 03, 2000 8:00 am
Secretary of State

05-03-2000 90040 004 ***158.75

1. Entity Name

ROSHER ELECTRIC COMPANY, INC.

Principal Place of Business
4664 HALLS MILL RD.
MOBILE AL 36693

Mailing Address
4664 HALLS MILL RD.
MOBILE AL 36693-5628

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4670 HALLS MILL ROAD
Suite, Apt. #, etc.

3. Mailing Address
4670 HALLS MILL ROAD
Suite, Apt. #, etc.

City & State: MOBILE, ALABAMA
Zip: 36693 Country: USA

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Zip: 36693 Country: USA

4. FEI Number 63-0626370 Applied For / Not Applicable

5. Certificate of Status Desired [X] $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCARTHUR, ROBERT S.
307 ADAMS AVE., APT. #11
CAPE CANAVERAL FL 32920

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

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. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) [ ]

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. [ ] **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	VD	[ ] Delete
NAME	MCARTHUR, JAMES H	
STREET ADDRESS	6406 FOX CREEK DRIVE S	
CITY-ST-ZIP	EIGHMILE AL	
TITLE	ST	[ ] Delete
NAME	LINDSEY, SUSAN D	
STREET ADDRESS	1409 OAK TREE CT	
CITY-ST-ZIP	MOBILE AL 36609	
TITLE	PD	[ ] Delete
NAME	GLASS, JAMES R.	
STREET ADDRESS	4055 HOOPER ST.	
CITY-ST-ZIP	MOBILE AL	
TITLE		[ ] Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		[ ] Change [ ] Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] Change [ ] Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] Change [ ] Addition
NAME		
STREET ADDRESS		
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TITLE		[ ] Change [ ] Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] Change [ ] Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E034 (9/99)

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.

SIGNATURE: FILED JAMES R GLASS 4/24/00 (334) 666-3510
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #