

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001936

FILED  
Jan 27, 2005  
Secretary of State

Entity Name: NEEL MECHANICAL CONTRACTORS, INC.

## Current Principal Place of Business:

250 COMMERCIAL DRIVE  
THOMASVILLE, GA 31757

## New Principal Place of Business:

## Current Mailing Address:

250 COMMERCIAL DRIVE  
THOMASVILLE, GA 31757

## New Mailing Address:

FEI Number: 74-2921764

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VASD ( ) Delete  
Name: BEITTENMILLER, J. GORDON  
Address: 777 POST OAK BLVD., SUITE 500  
City-St-Zip: HOUSTON, TX 77056

Title: VST ( ) Delete  
Name: ASHTON, TIMOTHY A  
Address: 250 COMMERCIAL DRIVE  
City-St-Zip: THOMASVILLE, GA 31757

Title: VAS ( ) Delete  
Name: GEORGE, WILLIAM  
Address: 777 POST OAK BLVD., SUITE 500  
City-St-Zip: HOUSTON, TX 77056

Title: SEC ( ) Delete  
Name: HINSON, CAROL H  
Address: 250 COMMERCIAL DRIVE  
City-St-Zip: THOMASVILLE, GA 31757

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PRES ( ) Change (X) Addition  
Name: WADE, MICHAEL J  
Address: 250 COMMERCIAL DRIVE  
City-St-Zip: THOMASVILLE, GA 31757

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROL H. HINSON

SEC

01/27/2005

Electronic Signature of Signing Officer or Director

Date