

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2002 8:00 am
Secretary of State

03-05-2002 90279 002 ***150.00
03-05-2002 90279 001 *****8.75

DOCUMENT # F00000003789

1. Entity Name

DOLEAC ELECTRIC COMPANY, INC.

Principal Place of Business

**1120 PINLO DR
HATTIESBURG MS 39403**

Mailing Address

**PO BOX 1936
HATTIESBURG MS 39403**

2. Principal Place of Business

1120 PINLO DR

3. Mailing Address

Suite, Apt. #, etc.

City & State

HATTIESBURG, MS

City & State

Zip

39403

Country

USA

Country

4. FEI Number

64-0640472

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SHAW, JAWE
529 WINDROSE CIRCLE
PENSACOLA FL 32507**

7. Name and Address of New Registered Agent

Name **JANE SHAW**

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, 2002 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 ☐ Delete
NAME **PD**
STREET ADDRESS **DOLEAC, DONALD L**
CITY-ST-ZIP **207 TIDEWATER ROAD
HATTIESBURG MS**

TITLE ☐ Delete
NAME **VD**
STREET ADDRESS **DOLEAC, JOHN L**
CITY-ST-ZIP **472 SANDY RUN ROAD
HATTIESBURG MS**

TITLE ☐ Delete
NAME **ST**
STREET ADDRESS **NETTLES, TARA S**
CITY-ST-ZIP **616 WOODLAND HILLS DR.
HATTIESBURG MS**

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
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Donald L. Doleac, President

1/30/02

601-544-2052

Date

Daytime Phone #

CR2E034 (9/01)