


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 12, 2006 08:00 AM
Secretary of State

DOCUMENT # F03000003394		
1. Entity Name JACKSONVILLE WINLECTRIC CO.		
Principal Place of Business 1000 HURRICANE SHOALS ROAD C-100 LAWRENCEVILLE, GA 30043	Mailing Address 1000 HURRICANE SHOALS ROAD C-100 LAWRENCEVILLE, GA 30043	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525		DO NOT WRITE 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 _____ <small>Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD HARTLEY, JAMES E 2075 N LIBERTY ST. JACKSONVILLE, FL 32206	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST MUEGEL, PHILIP E 1000 HURRICANE SHOALS RD C-100 LAWRENCEVILLE, GA 30043	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D OSENBAUGH, JACK D 3110 KETTERING BLVD. DAYTON, OH 45439	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ABBOTT, RUSSELL W 6236-A EAST OGELTHORPE HIGHWAY HINESVILLE, GA 31313	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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 attachment with an address, with all other like empowered.		
SIGNATURE: <u>Philip E Muegel</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> Date _____ Daytime Phone # _____		



05102006 No Chg-P CR2E034 (11/05)

4. FEI Number
20-0068449

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

000000564955
05/20/06-80095-021 150.00