## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 01, 2006 DOCUMENT# F95000002491 Secretary of State Entity Name: POWER MANAGEMENT CORPORATION CONSULTING ENGINEERS **Current Principal Place of Business: New Principal Place of Business:** 

1025 16TH AVENUE SOUTH

NASHVILLE, TN 37212

SUITE 300

**Current Mailing Address: New Mailing Address:** 

PO BOX 121136 NASHVILLE, TN 37212

1616 17TH AVE SOUTH

NASHVILLE, TN 37212

FEI Number: 62-1533376 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GORE, JOHN M 124 AVE C APALACHICOLA, FL 32320 US

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**FILED** 

Title: ( ) Delete Title: () Change () Addition GORE, JOHN M Name: Name:

124 AVENUE C Address: Address: City-St-Zip: APALACHICOLA, FL 32320 City-St-Zip:

Title: Title: () Delete (X) Change ( ) Addition

HALL, LOUIS C HALL, LOUIS C Name: Name:

1616 17TH AVE SOUTH 1025 16TH AVENUE SOUTH, SUITE 300 Address: Address:

NASHVILLE, TN 37212 NASHVILLE, TN 37212 City-St-Zip: City-St-Zip:

Title: Title: (X) Change ( ) Addition ( ) Delete

ADAMS, JUDSON ADAMS, JUDSON Name: Name:

1616 17TH AVE SOUTH 1025 16TH AVENUE SOUTH, SUITE 300 Address: Address:

City-St-Zip: NASHVILLE, TN 37212 City-St-Zip: NASHVILLE, TN 37212

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: JOHN M. GORE PC 03/01/2006