


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 20, 2004 08:00 AM
Secretary of State

DOCUMENT # F97000003177 1. Entity Name RIDLEY ELECTRIC COMPANY, INCORPORATED	
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Principal Place of Business 111 BUSCH DRIVE JACKSONVILLE, FL 32218	Mailing Address P.O. BOX 316 EASTWOOD STA. SYRACUSE, NY 13206 US
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DO NOT WRITE IN THIS SPACE



02232004 No Chg-P CR2E034 (10/03)

4. FEI Number 15-0591322	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CUMMINGS, F A 1004 DESOTO PARK DRIVE PO BOX 589 TALLAHASSEE, FL 32302-0589
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**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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000161075 05/20/04-80004-016 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CSD RIDLEY, LEE 2410 EUCLID AVE SYRACUSE, NY 13224
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RIDLEY, BENJAMIN 6924 HENDERSON RD JAMESVILLE, NY 13078
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MCBRIDE, MICHAEL 3603 MELVIN DRIVE SOUTH BALDWINVILLE, NY 13027
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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>Lee J. Ridley</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Lee J. Ridley/Treasurer	5/17/04	(315)463-8606
	Date	Daytime Phone #	