# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT # F97000003177

1. Entity Name RIDLEY ELECTRIC COMPANY, INCORPORATED



FILED Mar 16, 2006 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

111 BUSCH DRIVE JACKSONVILLE, FL 32218 P.O. BOX 316 EASTWOOD STA. SYRACUSE, NY 13206 US



### DO NOT WRITE IN THIS SPACE

03072006 No Chg-P

CR2E034 (11/05)

4. FEI Number 15-0591322 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CUMMINGS, F A 1004 DESOTO PARK DRIVE PO BOX 589 TALLAHASSEE, FL 32302-0589

## DO NOT WRITE IN THIS SPACE

₿.	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.

Signature, typed or printed name of repretend agent and this if applicable

(NOTE, Registered Agent signature required when reinstating)

DATE

#### FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00

Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. CSD TITLE RIDLEY, LEE NAME STREET ADDRESS 2410 EUCLID AVE CITY-ST-ZIP SYRACUSE, NY 13224 TRILE NAME RIDLEY, BENJAMIN 6924 HENDERSON RD STREET ADDRESS CITY-ST-ZIP JAMESVILLE, NY 13078 TITLE NAME MCBRIDE, MICHAEL 3603 MELVIN DRIVE SOUTH STREET ADDRESS ETTY-ST-ZIP BALDWINSVILLE, NY 13027 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling 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:

CIFY-ST-ZIP

STONATURE AND TYPED OR PRINTED JAME OF SIGNING OFFICER OR DIRECTOR

3-13-06 (31

315)463-8606