

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 29, 2001 8:00 am
Secretary of State

01-29-2001 90044 050 ***150.00

DOCUMENT # F97000004020

1. Entity Name

WILLIAMS NITRO ELECTRIC CO.

Principal Place of Business

**I-64 AND RTE 25, PO BOX 425
NITRO WV 25143**

Mailing Address

**2076 W PARK PLACE
STONE MOUNTAIN GA 33087**

2. Principal Place of Business

3. Mailing Address

2076 West Park Place

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **55-0753070**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 SO PINE ISLAND RD
PLANTATION FL 33324**

Name

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **WILLIAMS, J M JR**
STREET ADDRESS **2076 WEST PARK PLACE**
CITY-ST-ZIP **STONE MOUNTAIN GA 30087**

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

TITLE **D** ☐ Delete
NAME **WILLIAMS, VIRGIL R**
STREET ADDRESS **2076 WEST PARK PLACE**
CITY-ST-ZIP **STONE MOUNTAIN GA 30087**

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

TITLE **P** ☒ Delete
NAME **ROBUCK, K W**
STREET ADDRESS **2076 WEST PARK PLACE**
CITY-ST-ZIP **STONE MOUNTAIN GA 30087**

TITLE **President** ☐ Change ☒ Addition
NAME **T. A. Withrow**
STREET ADDRESS **I-64 and Route 25**
CITY-ST-ZIP **Nitro, WV 25143**

TITLE **VS** ☐ Delete
NAME **DANIELS, L C**
STREET ADDRESS **2076 WEST PARK PLACE**
CITY-ST-ZIP **STONE MOUNTAIN GA 30087**

TITLE **Vice-President** ☐ Change ☒ Addition
NAME **L. L. Ferguson**
STREET ADDRESS **I-64 and Route 25**
CITY-ST-ZIP **Nitro, WV 25143**

TITLE **AS** ☐ Delete
NAME **BLAIR, N. SHAWN**
STREET ADDRESS **2076 WEST PARK PLACE**
CITY-ST-ZIP **STONE MOUNTAIN GA 30087**

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

TITLE **AS** ☒ Delete
NAME **BLOUNT, LARRY A**
STREET ADDRESS **I64 RT 25**
CITY-ST-ZIP **NITRO WV 25143**

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

N. Shawn Blair, Asst. Secretary

01/11/2001 770-879-4165

Date

Daytime Phone #

(Legal Dept.)

CR2E034 (10/00)