

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 21, 2003 8:00 am
Secretary of State

03-21-2003 90078 028 ***150.00

DOCUMENT # F97000004020

1. Entity Name
NITRO ELECTRIC COMPANY



Principal Place of Business
**1-64 AND RTE 25, PO BOX 425
NITRO WV 25143**

Mailing Address
**2076 WEST PARK PLACE
STONE MOUNTAIN GA 33087**



2. Principal Place of Business
500 Corporate Centre Dr

3. Mailing Address
2076 West Park Place

Suite, Apt. #, etc.
Suite 100

Suite, Apt. #, etc.

City & State
Scott Depot, WV

City & State
Stone Mountain, GA 33087

4. FEI Number **55-0753070**

Applied For
Not Applicable

Zip
25560-9010

Country

Zip
30087-3530

Country

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

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

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

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

TITLE **P** ☐ Delete
NAME **BUKOWSKI, ROBERT W**
STREET ADDRESS **2076 WEST PARK PLACE**
CITY-ST-ZIP **STONE MOUNTAIN GA 30087**

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

TITLE **AS** ☐ Delete
NAME **ROBINSON, TINA R I**
STREET ADDRESS **2076 W, PARK PL**
CITY-ST-ZIP **STONE MOUNTAIN GA 30087**

TITLE **VP** ☒ Delete
NAME **FERGUSON, LL**
STREET ADDRESS **500 TEAYS CORPORATE CENTER, STE 100**
CITY-ST-ZIP **SCOTT DEPOT WV 25560**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

TITLE **Senior Vice President** ☒ Change ☐ Addition
NAME **L. L. Ferguson**
STREET ADDRESS **500 Corporate Centre, Suite 100**
CITY-ST-ZIP **Scott Depot, WV 25560**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: TINA R I ROBINSON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/03

770 8794065

Date

Daytime Phone #

CR2E034 (10/02)