

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002733

FILED
Mar 17, 2009
Secretary of State

Entity Name: HARDY-WILSON ELECTRIC COMPANY, INC.

Current Principal Place of Business:

762 HOLCOMBE AVE
MOBILE, AL 36606

New Principal Place of Business:

Current Mailing Address:

PO BOX 6129
MOBILE, AL 36660

New Mailing Address:

FEI Number: 63-0901156

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, S. BRETT
850 AIRPORT ROAD
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

HARDY, RON
781 CHOCTAWATCHEE RIVER ROAD
BRUCE, FL 32455 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: RON HARDY

03/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: WILSON, ALVIN
Address: 762 HOLCOMBE AVENUE
City-St-Zip: MOBILE, AL 36606

Title: VST () Delete
Name: HARDY, INNES N
Address: 762 HOLCOMBE AVENUE
City-St-Zip: MOBILE, AL 36606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ALVIN WILSON

PC

03/17/2009

Electronic Signature of Signing Officer or Director

Date