

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2001 8:00 am
Secretary of State
04-11-2001 90053 043 ***158.75

0596302

DOCUMENT # F99000002863

1. Entity Name

EDWARDS ELECTRICAL & MECHANICAL INC

Principal Place of Business

**6831 E 32ND STREET
INDIANAPOLIS IN 46226**

Mailing Address

**6831 E 32ND STREET
INDIANAPOLIS IN 46226**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **35-1142330**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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.

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

TITLE **CP** ☐ DeleteNAME **EILMANN, ERVIN**
STREET ADDRESS **6831 E 32ND STREET**
CITY-ST-ZIP **INDIANAPOLIS IN 46226**TITLE **D** ☐ DeleteNAME **ALEXANDER, ANTHONY J**
STREET ADDRESS **76 SOUTH MAIN**
CITY-ST-ZIP **AKRON OH 44308**TITLE **D** ☒ DeleteNAME **BURG, H. PETER**
STREET ADDRESS **76 SOUTH MAIN**
CITY-ST-ZIP **AKRON OH 44308**TITLE **T** ☒ DeleteNAME **LAUGHLIN, JANICE**
STREET ADDRESS **6831 E 32ND ST**
CITY-ST-ZIP **INDIANAPOLIS IN 46226**TITLE ☐ DeleteNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DeleteNAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Treasurer / Asst. Corp. Secretary** ☐ Change ☒ AdditionNAME **Tom Eggers**
STREET ADDRESS **6831 E. 32nd St., Indpls, IN 46226**
CITY-ST-ZIPTITLE **Director** ☐ Change ☒ AdditionNAME **Kathryn W. Dindo**
STREET ADDRESS **76 S. Main St.**
CITY-ST-ZIP **AKRON OH 44308**TITLE **Director** ☐ Change ☒ AdditionNAME **Samuel A. Roth**
STREET ADDRESS **76 S. Main St.**
CITY-ST-ZIP **AKRON OH 44308**TITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
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

3-28-04

Date

317-543-3460

Daytime Phone #

CR2E034 (10/00)