2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 17, 2006
Secretary of State

DOCUMENT# F99000003210

Entity Name: APEX ELECTRIC INC., OF OHIO

Current Principal Place of Business:

368 PENNLINE ROAD
PIERPONT, OH 44082

New Principal Place of Business:

Current Mailing Address:

368 PENNLINE ROAD
PIERPONT, OH 44082

New Mailing Address:

FEI Number: 34-1891109 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ELISHA AND KELLY DE LEON
C/O 7300 SW 198TH AVE
DUNNELLON, FL 34431 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SANFORD, MARK L
Address: 344 PENNLINE RD
City-St-Zip: PIERPONT, OH 44082

Title: T ( ) Delete
Name: SANFORD, EDITH M
Address: 344 PENNLINE RD
City-St-Zip: PIERPONT, OH 44082

Title: S ( ) Delete
Name: SANFORD, SHALENE M
Address: 454 BAHIC ST
City-St-Zip: CONNEAUT, OH 44030

Title: VP ( ) Delete
Name: SANFORD, MARK L JR
Address: 654 BALTIC ST
City-St-Zip: CONNEAUT, OH 44030

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change ( ) Addition
Name: SANFORD, SHALENE M
Address: 654 BAHIC ST
City-St-Zip: CONNEAUT, OH 44030

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

I hereby certify that the information supplied with this filing does not qualify for the 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: SHALENE M. SANFORD S 05/17/2006

Electronic Signature of Signing Officer or Director — Date