

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J00588

FILED  
Feb 24, 2006  
Secretary of State

Entity Name: FLORIDA ELECTRIC WORKS, INC.

## Current Principal Place of Business:

1412 INTREPID DRIVE  
DELAND, FL 32724 US

## New Principal Place of Business:

1862 B PATTERSON AVE  
DELAND, FL 32724 US

## Current Mailing Address:

1412 INTREPID DRIVE  
DELAND, FL 32724 US

## New Mailing Address:

PO BOX 1300  
DELAND, FL 32721 US

FEI Number: 59-2650499

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COGGINS, LESLIE S.  
1412 INTREPID DR  
DELAND, FL 32724 US

## Name and Address of New Registered Agent:

COGGINS, LESLIE S.  
1862 B PATTERSON AVE  
DELAND, FL 32724 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: LESLIE S COGGINS

02/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PCD ( ) Delete  
Name: COGGINS, LESLIE S  
Address: 317 N FLORIDA AVE  
City-St-Zip: DELAND, FL 32720

Title: VDS ( ) Delete  
Name: COGGINS, LONNIE S  
Address: 317 N FLORIDA AVE  
City-St-Zip: DELAND, FL 32720

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCD (X) Change ( ) Addition  
Name: COGGINS, LESLIE S  
Address: 1862 B PATTERSON AVE  
City-St-Zip: DELAND, FL 32724

Title: VDS (X) Change ( ) Addition  
Name: COGGINS, LONNIE S  
Address: 1862 B PATTERSON AVE  
City-St-Zip: DELAND, FL 32724

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: LONNIE S COGGINS

VDS

02/24/2006

Electronic Signature of Signing Officer or Director

Date