

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L36660

FILED
Jul 05, 2005
Secretary of State

Entity Name: WHITTINGTON ELECTRIC, INC.

Current Principal Place of Business:

OLD GAINESVILLE HWY
INTERLACHEN, FL 32148 US

New Principal Place of Business:

1213 OLD GAINESVILLE HWY
INTERLACHEN, FL 32148 US

Current Mailing Address:

P.O. BOX 70
INTERLACHEN, FL 32148 US

New Mailing Address:

FEI Number: 59-2980464 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITTINGTON, GLENN D
RT 2 BOX 74
INTERLACHEN, FL 32148 US

Name and Address of New Registered Agent:

WHITTINGTON, GLENN D
P.O. BOX 70
INTERLACHEN, FL 32148 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:

Electronic Signature of Registered Agent

07/05/2005

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WHITTINGTON, GLENN D,
Address: RT 2 BOX 74
City-St-Zip: INTERLACHEN, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WHITTINGTON, GLENN D,
Address: P.O. BOX 70
City-St-Zip: INTERLACHEN, FL

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GLENN D WHITTINGTON

D

07/05/2005

Electronic Signature of Signing Officer or Director

Date