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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L52014

(2)

WADDELL & WHITED ELECTRIC, INC.

| WADDE | L & WHITEU ELECTRIC, IF | 10. | | | | | | |
|--|--|--|---------------------|----------------------------|------------|--|----------------------------------|---|
| Principal Place | of Business | Mailing Address | | | | A HERITEN OUR ONIAU HOLE DEFOI AND A DIO H | 731 B1811 B3811 \$1811 A1811 | |
| 1105 W. SWILLEY RD. PLANT CITY FL 33567 US | | P. O. BOX 461 DURANT FL 33530-0461 | | | | | | |
| | | | | | | 02/14/1990 | 3a. Date of Last R 01/29/1996 | , |
| 1 | ace of Business | 28. Mailing Address | | | | 4. FEI Number | | oplied For |
| 21 Suite, Apt | # otc | Suite, Apt. #, etc. | | | , | 59-2994125 | 60.75 | ot Applicable Additional |
| 22 | ., 010. | 27 | | | | 5. Certificate of Status Desired | | equired |
| City & State |) | City & State | | | | Election Campaign Financing Trust Fund Contribution | | May Be to Fees |
| Zip | Country | Zip | Coun | try | | 8. This corporation has liability for inte | | |
| 24 | 25 | | 30 | | | Florida Statutes | Yes No | |
| | 9. Name and Address of Curren | t Registered Agent | | 41 61 | | 10. Name and Address of New Region | stered Agent | |
| | ODELL, JAMES R. | | • | Name |) | | | |
| | 5 WEST SWILLEY ROAD NT CITY FL 33567 | | E | 2 Street | Addre | ss (P.O. Box Number is Not Acceptable | } | |
| , , | | | [8 | 13 | | | | |
| | | | - [| 4 City | | | FL III | Code |
| 11. Pursuant t | to the provisions of Sections 607.050 egistered agent, or both, in the State | 2 and 607.1508, Florida Statute of Florida Such change was a | s, the about | ove-named by the co | d corpo | ration submits this statement for the pur on's board of directors. I hereby accept | pose of changing it | ts registered registered |
| agent. La | m familiar with, and accept the obliga | ations of, Section 607.0505, Flor | rida Statu | les. | | | | |
| SIGNATURE | Synature, typed or printed name of registered age | L James R. | Not d | dell | e reculred | d when reinstating) | 27, 1997 | *************************************** |
| 12. | OFFICERS ANI | | 13. | - Soi it also into | o reduier | ADDITIONS/CHANGES TO OFFICE | | RS IN 12 |
| TITLE | PSD | DELETE | 1 1 TITL | E | 1 | | ☐ Change | ☐ Addition |
| NAME | WADDELL, JAMES R. | | 1.2 NAM | IE | | | | |
| STREET ADDRESS | 1105 WEST SWILLEY RD. | | 1.3 STR | EET ADDRESS | | | | |
| CITY-ST-ZIP | PLANT CITY FL | Sleevere | | -ST-ZIP | ļ., | , , , , , , , , , , , , , , , , , , , | 52 5 | A date: |
| TITLE | CVD | ⊠ DELETE | 2.1 TITL | | 100 | VD Hited, William L. OH KENT PATH CT. THIA, Fl. 33547 | Change | Addition |
| NAME OVERTI ADDRESS | WHITED, WILLIAM L. 8925 CAREY RD. | | 2.2 NAM | ie Eet adoress | 25 | OH KENT PATH CT. | | |
| STREET ADDRESS CITY-ST-ZIP | LITHIA FL | | | Y-ST-ZIP | 136 | TU'A F/ 22647 | | |
| TITLE | DITIESTE | DELETE | 3.1 TITE | | 1 | 1111a, 11. 27271 | Change | Addition |
| NAME | | | 3.2 NAN | IE | | | | |
| STREET ADDRESS | | | 3.3 STR | EET ADDRESS | | | | |
| CITY-S1-ZIP | | | 3.4 CIT | Y-ST-ZIP | | | | |
| TITLE | | ☐ DELETE | 4.1 TITE | E | | | ☐ Change | Addition |
| NAME | | | 4. 2 NA | ΛE | | | | |
| STREET ADDRESS | | | | EET ADORESS | | | | |
| CITY-ST-ZIP | | DELETE | | '-ST-ZIP | | | Change | Addition |
| TITLE NAME | | ☐ ptreit | 5.1 TITL 5.2 NAM | | | | L. Change | F" VOORING |
| } | | | | il Eet address | | | | |
| STREET ADDRESS CITY - ST - ZIP | | | | re i Audumess '-\$t-zip | | | | |
| TITLE | · · · · · · · · · · · · · · · · · · · | ☐ DELETE | 6.1 TITL | | † | | ☐ Change | Addition |
| NAME | | | 6.2 NAM | 1E | | | | |
| STREET ADDRESS | | | 6.3 STR | eet address | | | | |
| City-St-ZiP | | | | -ST-ZIP | <u> </u> | | | |
| informatio | ri indicated on this annual report or s | supplemental annual report is tri | ue and ac | curate an | d that r | in Section 119.07(3)(i), Florida Statutes. ny signature shall have the same legal s | effect as if made un | ider oath; that |
| I am an ol | flicer or director of the corporation or n Block 12 or Block 13 if changed, o | the receiver or trustee empower | ered to ex | ecute this | report | as required by Chapter 607, Florida Sta | tutes; and that my i | name |

SIGNATURE: Janes R. Waddell James R. Waddell 1-27-97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date

30E034 (9/06)

FILED

Jan 31 1997 8:00am

Secretary of State