

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

S03254900682
9/9/2003-90018-037-\$50.00-\$50.00




FILED

2003 OCT -3 PM 2:34

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



☐ CHECK HERE IF MAKING CHANGES

| | | | |
|---|---|--|---|
| DOCUMENT # M97000000681 | |  | |
| 1. Entity Name ACE ELECTRICAL ACQUISITION, LLC | | | |
| Principal Place of Business 501 SOUTH EAST AVENUE COLUMBUS KS 66725 | | Mailing Address P.O. BOX 151 COLUMBUS KS 66725 | |
| 2. Principal Place of Business | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |
| 4. FEI Number 74-2850614 | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$5.00 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent | | 7. Name and Address of New Registered Agent | |
| NRAI SERVICES, INC. 526 EAST PARK AVENUE TALLAHASSEE FL 32301 | | Name: William Watts Street Address (P.O. Box Number is Not Acceptable) 2150 Brengle Ave City: ORLANDO, FL Zip Code: 32803 | |
| 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. I am familiar with, and accept the obligations of registered agent. | | | |
| SIGNATURE  | | DATE 7/28/03 | |
| \$900,000.00 | | FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By September 24, 2003 | |
| 9. MANAGING MEMBERS/MANAGERS | | 10. ADDITIONS/CHANGES | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DESMOND, DENIS 111 HIDDEN VALLEY DRIVE JOPLIN MO 64804 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | MANAGING MEMBER RICH D'ANTONIO 2150 BRENGLE AVE ORLANDO, FL 32803 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | OROPEZA, FRANK C 2150 BRENGLE AVE ORLANDO FL 32803 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DEVERALL, ROBERT M 2150 BRENGLE AVE ORLANDO FL 32803 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | MANAGING MEMBER WILLIAM WATTS 2150 BRENGLE AVE ORLANDO, FL 32803 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 606, Florida Statutes. | | | |
| SIGNATURE:  | | DATE 7/28/03 Daytime Phone # 407-298-4563 | |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE | | | |

CR2E083 (4/03)