2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000092108

Entity Name: WILLCO ELECTRIC INC.

FILED Apr 10, 2008 Secretary of State

| Current Principal Place of Business: | | | New Principal Place of Business: | | |
|---|--|--------------------------------|---|--|--|
| 3395 SW 7 SUITE C-2 OCALA, FI | 2 | | | | |
| Current Mailing Address: | | | New Mailing Addres | s: | |
| 3395 SW 7 SUITE C-2 OCALA, FI | 2 | | | | |
| FEI Number: | : 65-1050166 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and | Address of (| Current Registered Agent: | Name and Address of | of New Registered Agent: | |
| The above | 74TH AVE 2 - 34474 US | submits this statement for the | purpose of changing its registere | d office or registered agent, or both, | |
| SIGNATUF | RE: | | | | |
| | Electro | nic Signature of Registered Ag | gent | Date | |
| Election Car | npaign Financin | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | HENRY, DARU | AVE SUITE C-2 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | BOUNMYSAI, I | H AVE SUITE C-2 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | TR (X HOWARD, KEI 10901 HOLLY RIVERVIEW, F | CONE DR | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VP (X HENRY, CARL 3395 SW 74 A OCALA, FL 34 | VE SUITE C-2 | Title: Name: Address: City-St-Zip: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify 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: DARUE HENRY PT | D 04/10/2008 |
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