

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 13, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P01000093628**

1. Entity Name  
**HINOTE ELECTRIC, INC.**



Principal Place of Business  
**3350 NW 57TH CT  
CHIEFLAND, FL 32626 US**

Mailing Address  
**3350 NW 57TH CT  
CHIEFLAND, FL 32626 US**



04232008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3749261**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**HINOTE, CHARLES W  
3350 NW 57TH CT  
CHIEFLAND, FL 32626**

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

U000000951139  
06/04/08-80020-018 150.00

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
HINOTE, CHARLES  
3350 NW 57TH CT  
CHIEFLAND, FL 32626**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VP  
HINOTE, WILLIAM  
3350 NW 57TH CT  
CHIEFLAND, FL 32626**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**S  
HINOTE, JANET  
3350 NW 57TH CT  
CHIEFLAND, FL 32626**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Charles W. Hinate*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**5-1-08**  
Date

Daytime Phone #