2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE

## **ANNUAL REPORT (AR) FILED** DOCUMENT # P03000139400 Jan 29, 2007 08:00 AM **Secretary of State** RILEY-PRESLEY ELECTRIC CO., INC. Principal Place of Business Mailing Address 5613 BALSAM STREET **5613 BALSAM STREET** MILTON FL 32583 MILTON FL 32583 2. Principal Place of Business - No P.O. Box # 3. Maifing Address Suite, Apl. #, etc. Suito, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State 4. FEI Number Applied For City & State 55-0855229 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo FITZGERALD, J. PAUL Street Address (P.O. Box Number is Not Acceptable) 6839 CAROLINE STREET MILTON FL 32570 Zip Code 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 mine of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 n ши ☐ Change Addition Dotete Hit PRESLEY, JOSEPH B SR NAME NAME U000000610455 <u> ეგ/ტგეტუ-ტტტგ</u>25—ე15 150.00 5613 BALSAM STREET SURE LADDRESS STREET ADDRESS MILTON FL 32583 CHY ST-ZIP CHY-SI-ZIP Delete ☐ Change Addition PRESLEY, JOSEPH B JR NAME 5613 BALSAM STREET STREET ADDDESS STREET ADORESS MILTON FL 32583 CITY-ST-712 CITY-ST-ZIP Detete Change mir ■ Addition 11116 RILEY, L.W. NAME NAME 4613 RILEY ROAD STREET ADDRESS STRIET ADDRESS MILTON FL 32583 CHY-SI-Z)P CITY-ST-7/P HHE Dolete ☐ Addition NAME NAMI STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP Delete ☐ Change Addition THE ши. NAME NAMI STREET ADORESS STREET ADDRESS CITY - ST - ZIP CJIY-SJ-ZIP mir ☐ Delete mic Change ☐ Adddion NAME NAME STREET ADDRESS STRUET ADDRESS CITY-SI-ZIP CITY+SI-74P 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 offect as if made under eath; 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

JUSCONH D PROSLEY SA) 1/20/07 (850)623 3943