
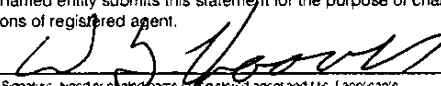
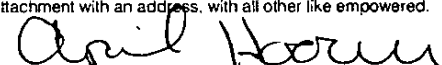


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2006 8:00 am
Secretary of State

05-03-2006 90201 012 ***158.75

DOCUMENT # P03000139747 1. Entity Name HOOVER & ASSOCIATES ELECTRIC CO. INC.					
Principal Place of Business 481572 MIDDLE ROAD HILLIARD, FL 32046 US				Mailing Address 481572 MIDDLE ROAD HILLIARD, FL 32046	
2. Principal Place of Business 481572 HADDOCK RD		3. Mailing Address 481572 HADDOCK RD			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State HILLIARD, FL		City & State HILLIARD, FL		4. FEI Number 20-0440550	
Zip 32046		Country US		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HOOVER, WILLIAM L 481572 MIDDLE ROAD HILLIARD, FL 32046				7. Name and Address of New Registered Agent Name HOOVER, WILLIAM L Street Address (P.O. Box Number is Not Acceptable) 481572 HADDOCK RD City HILLIARD FL Zip Code 32046	
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 5/1/06 <small>Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HOOVER, WILLIAM L 481572 MIDDLE ROAD HILLIARD, FL 32046	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HOOVER, WILLIAM L 481572 HADDOCK RD HILLIARD, FL 32046	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HOOVER, APRIL L 481572 MIDDLE ROAD HILLIARD, FL 32046	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HOOVER, APRIL L 481572 HADDOCK RD HILLIARD, FL 32046	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC HOOVER, APRIL L 481572 MIDDLE ROAD HILLIARD, FL 32046	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HOOVER, APRIL L 481572 HADDOCK RD HILLIARD, FL 32046	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRES HOOVER, APRIL L 481572 MIDDLE ROAD HILLIARD, FL 32046	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HOOVER APRIL L 481572 HADDOCK RD HILLIARD, FL 32046	<input checked="" 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
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
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: 			Date 5/1/06 Daytime Phone # 904-845-2073		

ATTACHMENT 40080715
#P03000139747

Page 1 of 1

Subj: Hoover & Assoc. 2006 Annual Report late fee waiver request
Date: 5/1/2006 11:52:13 P.M. Eastern Standard Time
From: HOOVER LU177
To: corphelp@dos.state.fl.us

To Whom It May Concern,

My name is April Hoover with Hoover & Associates Electric Co. Inc. (FEIN #20-0440550 / Doc #P03000139747). I attempted to file our 2006 annul report electronically, today 5/1/06. However, after trying several times I continued to receive an error message not allowing me to proceed. The error message stated, "CGI Timeout"; "The specified CGI application exceeded the allowed time for processing. The server has deleted the process". I tried calling the technical support line (850-245-6939) but the office had closed for the day. I have printed and filled out a hard copy of the report and written a check in the sum of \$158.75. Please waive the late fee of \$400.00 due to technical error.

Best Regards,
April Hoover, VP
Hoover & Associates
PH: (904) 845-2073

CGI Application Timeout

Page 1 of 1

CGI Timeout

ATTACHMENT 40080715
#P03000139747

The specified CGI application exceeded the allowed time for processing. The server has deleted the process.