

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000116162

FILED
Feb 06, 2009
Secretary of State**Entity Name:** POWER SOLUTIONS ELECTRIC, INC.**Current Principal Place of Business:**1433 ROMNEY ST
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JACKSONVILLE, FL 322119113**New Principal Place of Business:****Current Mailing Address:**1433 ROMNEY ST
1
JACKSONVILLE, FL 322119113**New Mailing Address:****FEI Number:** 20-1480309 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**SMITH, MARK A
6644 RAMOTH DRIVE
JACKSONVILLE, FL 32226 US**Name and Address of New Registered Agent:**

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** CEO () Delete
Name: SMITH, JOYCE A
Address: 6644 RAMOTH DRIVE
City-St-Zip: JACKSONVILLE, FL 32226**Title:** P () Delete
Name: SMITH, MARK A
Address: 6644 RAMOTH DRIVE
City-St-Zip: JACKSONVILLE, FL 32226**Title:** VP () Delete
Name: SMITH, JOYCE A
Address: 6644 RAMOTH DRIVE
City-St-Zip: JACKSONVILLE, FL 32226 US**Title:** SEC () Delete
Name: WOODWARD, CHARLES B
Address: 1143 FROMAGE CIRCLE WEST
City-St-Zip: JACKSONVILLE, FL 32225 US**Title:** TRES () Delete
Name: HAYNES, WALTER E
Address: 116 SEAGRAPE DRIVE
City-St-Zip: JACKSONVILLE, FL 32211 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** SEC (X) Change () Addition
Name: SMITH, MARK A
Address: 6644 RAMOTH DR,
City-St-Zip: JACKSONVILLE, FL 32226 US**Title:** TRES (X) Change () Addition
Name: SMITH, JOYCE A
Address: 6644 RAMOTH DR.
City-St-Zip: JACKSONVILLE, FL 32226 US

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: JOYCE A. SMITH

CEO

02/06/2009

Electronic Signature of Signing Officer or Director

Date