***2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)**

Mar 08, 2006 8:00 am **Secretary of State DOCUMENT # P05000072880** 1. Entity Name 03-08-2006 90174 022 ***158.75 T AND T ELECTRIC, INC. Principal Place of Business Mailing Address 4250 DOW ROAD UNIT 306 4250 DOW ROAD UNIT 306 MELBOURNE FL 32934 MELBOURNE FL 32934 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) 4. FEI Number Applied For City & State City & State 20-3003341 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HEALY, PATRICK F Street Address (P.O. Box Number is Not Acceptable) 1800 W HIBISCUS BLVD STE 138 MELBOURNE FL 32901 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. ne of registered agent and little if applicable FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. ☐ Delete TITLE TITLE Change ☐ Addition Ty Daniel Buterbaugh 4250 Dow Rd Unit 306 NAME NAME BUTERBAUGH, TY STREET ADDRESS STREET ADDRESS 4250 DOW ROAD UNIT 306 CITY-ST-ZIP MELBOURNE FL 32934 CITY-ST-ZIP Melbourne FL 32934 THE ☐ Delete ип е ☐ Change Addition Connie R. Buterbaugh NAME NAME 2915 Pomello ROAd STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MAIABAL FL 32950 Change Addition TITLE ☐ Delete NAME NAM STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Defete TITLE ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP TITLE Change TITLE ☐ Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Defete TITLE Change ☐ Addition TITLE NAME STREET ADDRESS STREET AODRESS CITY-ST-ZIP

FILED

TU DANIEL BUTERBAUCH Pres 02.21.06 (321)729.9679 SIGNATURE:

12. I hereby certify that the information supplied with this filling 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 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, Rorida 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.