## 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR).

## Feb 20, 2007 8:00 am Secretary of State DOCUMENT # P08070 1. Entity Name 02-20-2007 90060 031 \*\*\*150.00 XCEL ERECTORS, INC. Principal Place of Business Mailing Address 13515 BALLANTYNE CORPORATE PLACE 13515 BALLANTYNE CORPORATE PLACE CHARLOTTE NC 28277 CHARLOTTE NC 28277 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State 4. FEI Number Applied For City & State 48-1005483 Not Applicable Zip Country Zio 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 CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 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. | 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 reinstalling) DATE 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 PD 🖄 Delele TIME TITLE P DAddition □ Change O'LEARY, PATRICK J NAME NAME Robert Foreman 13515 BALLANTYNE CORPORATE PLACE STRIET ADDRESS STREEL LADDRESS 13515 Ballantyne Corp. Pl. CHARLOTTE NC 28277 CITY-ST-ZIP CITY-ST-ZIP Charlotte, NC 28277 HILE ☐ Delete 1016 Change ☐ Addition REILLY, MICHAEL NAME NAMI 13515 BALLANTYNE CORPORATE PLACE STREET ADDRESS STREET ADDRESS CHARLOTTE NC 28277 CITY-ST-ZIP CITY-ST ZIP AT RHE ☐ Delete □ Change Addition GIZA, RONALD NAM NAM 13515 BALLANTYNE CORPORATE PLACE STREET ADDRESS STREET ADDRESS CHARLOTTE NC 28277 CITY-ST-7IP CITY-SI-7IP HILL ☐ Delete DJU Change Addition NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CHY-ST-ZIP THE ☐ Defete TITLE ☐ Change ☐ Addition NAM NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY - ST - ZIP ☐ Delete TOTE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 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. Ronald Giza

SIGNATURE:

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2/07

Date

231-737-5017

FILED

Daylime Phone #