1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P29945

Corporation Name

ELECTRICAL DESIGN ENTERPRISES, INC.

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90021 047 ***150.00



Principal Place of Business P O BOX 2177 BOONE NC 28607-9177 P O BOX 2177 BOONE NC 28607-9177 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 06/27/1990 2. Principal Place of Business 21 346 Sutherland Rd 28 346 Sutherland Rd Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 6. Election Campaign Financing \$5.00 May 6
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23 Creston NC 28 Creston NC Trust Fund Contribution Added to Fee Zip Country Zip Country 8, This corporation owes the current year Intangible
24 28615 25 AShe 29 28615 30 AShe Personal Property Tax. Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent
81 Name
SETZER, ROBERT W.
#32 ELIONA CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable)
WESLEY CHAPEL FL 34249
84 City 85 Zip Code
FL W FS ST
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registere agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.
SIGNATURE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN Change
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 of the receiver of ruletee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed on an attachment with an address, with all other like empowered.

SIGNATURE:

NATURE WAS TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-3-99

336-385-1300 Daytime Phone # R2E034 (11/98)