2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000017425

Entity Name: PORT ORANGE ELECTRIC COMPANY

FILED Jan 10, 2007 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

5811 SPRUCE CREEK WOODS DRIVE 1145 SADDLE RUN

PORT ORANGE, FL 32127 NEW SMYRNA BEACH, FL 32168

Current Mailing Address: New Mailing Address:

5811 SPRUCE CREEK WOODS DRIVE 1145 SADDLE RUN

PORT ORANGE, FL 32127 NEW SMYRNA BEACH, FL 32168

FEI Number: 59-3140907 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HAGLUND, BRUCE HAGLUND, BRUCE 5811 SPRUCE CREEK WOODS DRIVE HAGLUND, BRUCE 1145 SADDLE RUN

PORT ORANGE, FL 32127 US NEW SMYRNA BEACH, FL 32168 US

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: BRUCE HAGLUND 01/10/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 HAGLUND, BRUCE
 Name:
 HAGLUND, BRUCE

 Address:
 5811 SPRUCE CREEK WOODS DR
 Address:
 1145 SADDLE RUN

City-St-Zip: PORT ORANGE, FL City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VP () Delete Title: () Change () Addition

 Name:
 JAWORSKI RÖBERT,
 Name:

 Address:
 410 MOSS
 Address:

 City-St-Zip:
 HARBOR OAKS, FL
 City-St-Zip:

 $\label{eq:title:S} {\sf Title:} \qquad {\sf S} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf S} \qquad {\sf (X) Change () Addition}$

 Name:
 HAGLUND, BRUCE
 Name:
 HAGLUND, BRUCE

 Address:
 5811 SPRUCE CREEK WOODS DR
 Address:
 1145 SADDLE RUN

City-St-Zip: PORT ORANGE, FL City-St-Zip: NEW SMYRNA BEACH, FL 32168

I hereby certify that the information supplied with this filing does not qualify for the 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: BRUCE HAGLUND PRES 01/10/2007