

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000065558

Entity Name: ELECTROLS, INC.

FILED  
Jan 19, 2006  
Secretary of State

## Current Principal Place of Business:

14421 BRIDGEVIEW LANE  
PORT CHARLOTTE, FL 33953

## New Principal Place of Business:

## Current Mailing Address:

PO BX 1143  
P. O. BOX 381143  
MURDOCK, FL 339381143 US

## New Mailing Address:

FEI Number: 65-0519661      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MILLS, ROBERT J  
14421 BRIDGEVIEW LANE  
PORT CHARLOTTE, FL 33953      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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: V ( ) Delete  
Name: MILLS, JACK J  
Address: 53501 STONEHENGE DR  
City-St-Zip: SHELBY TWP, MI

Title: ST ( ) Delete  
Name: MILLS, CHRISTOPHER A  
Address: 17307 HILLCREST DRIVE  
City-St-Zip: MACOMB, MI 48044

Title: P ( ) Delete  
Name: MILLS, ROBERT J  
Address: 14421 BRIDGEVIEW LANE  
City-St-Zip: PORT CHARLOTTE, FL

Title: VP ( ) Delete  
Name: MILLS, JR, ROBERT J  
Address: 1465 HORSESHOE CIRCLE  
City-St-Zip: MILFORD, MI 48381

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change ( ) Addition  
Name: MILLS, JACK J  
Address: 53501 STONEHENGE DR  
City-St-Zip: SHELBY TWP, MI 48315

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: MILLS, ROBERT J  
Address: 14421 BRIDGEVIEW LANE  
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ROBERT J. MILLS

P

01/19/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date