2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000007840

Entity Name: SNELGROVE ELECTRONICS INC.

FILED Jan 23, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

14557 NW US HWY 441 ALACHUA, FL 32615

Current Mailing Address: New Mailing Address:

14557 NW US HWY 441 ALACHUA, FL 32615

FEI Number: 59-3353421 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:

SNELGROVE, DIANA H SNELGROVE, DIANA H 14557 NW UŚ HWY 441 STE 120 210 NW 1ST AVE HIGH SPRINGS, FL 32643 US ALACHUA, FL 32643

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: DIANA SNELGROVE 01/23/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition SNELGROVE, WAYNE SNELGROVE, WAYNE Name: Name: 210 NW FIRST AVE. Address: Address:

14557 NW US HWY 441 STE 120 City-St-Zip: HIGH SPRINGS, FL 32643 City-St-Zip: ALACHUA, FL 32615

Title: VD Title: (X) Change () Addition () Delete SNELGROVE, DIANA H SNELGROVE, DIANA H Name: Name: 210 NW FIRST AVE. 14557 NW US HWY STE 120 Address: Address: HIGH SPRINGS, FL 32643 ALACHUA, FL 32615

Title: Title: SD () Delete () Change () Addition

City-St-Zip:

PAYNE, AMANDA S Name: Name: 12610 NW 214TH TERR Address: Address: City-St-Zip: HIGH SPRINGS, FL 32643 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.

Ρ SIGNATURE: DIANA SNELGROVE 01/23/2007