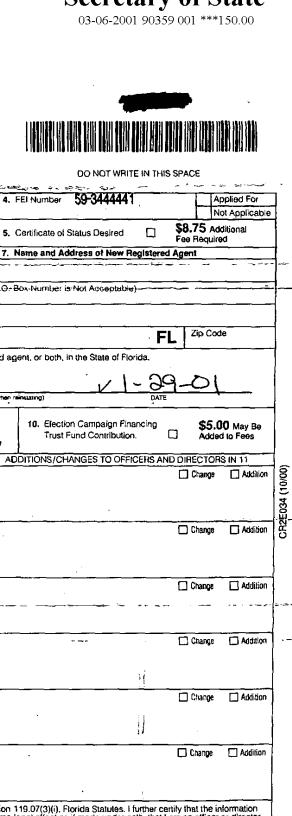
## 2001 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P96000103118 03-06-2001 90359 001 \*\*\*150.00 WELLS ELECTRICAL ENTERPRISE, INC. Principal Place of Business Mailing Address 5318 ST. LUCIA DR. 5318 ST. LUCIÁ DR. LAKELAND FL 33813 LAKELAND FL 33813 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 59-3444441 City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Ζlρ 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 WELLS, ROGER -Street-Address (P.O.-Box-Number is Not Acceptable) 5318 ST. LUCIA DR. LAKELAND FL 33813 City 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. SIGNATURE 1 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filling requirement and elects to do so. Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE Delete TITLE ☐ Addition WELLS, ROGER NAME NAME 5318 ST. LUCIA DR. STREET ADDRESS STREET ADDRESS LAKELAND FL CITY-ST-7/P CITY-ST-ZIP SD TITLE ☐ Delete TITLE □ Change ☐ Addition WÊLLS, LINDA D NAME 5318 ST. LUCIA DR. STREET ADDRESS STREET ADDRESS LAKELAND FL CITY-ST-ZIF CITY-ST-ZIP VPD ☐ Delete TITLE ☐ Change ☐ Addition TITLE WELLS, MEGHAN NAME NAME 5318 ST. LUCIA DR. STREET ADDRESS STREET ADDRESS LAKELAND FL CITY-ST-ZIP CITY-ST-ZIP TITLE Delete. TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 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 11 or Block 12 if charged, or on an affactment with an address, with alpother like empowered.

## FILED Mar 06, 2001 8:00 am Secretary of State





## FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

February 15, 2001

WELLS ELECTRICAL ENTERPRISE, INC. 5318 ST. LUCIA DR. LAKELAND, FL 33813

Subject: WELLS ELECTRICAL ENTERPRISE, INC.

Reference

P96000103118

Number:

Please be advised, we have received your annual report/uniform business report; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The fee to file the enclosed profit annual report/uniform business report is \$150.00. If a certificate of status is desired, please add an additional \$8.75.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box-1500, Fallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/fm ANNUAL REPORTS SECTION