


2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000024599		
1. Entity Name WELTON ELECTRIC, INC.		
Principal Place of Business 2034 DROYLSDEN LANE EUSTIS, FL 32726	Mailing Address 2034 DROYLSDEN LANE EUSTIS, FL 32726	

FILED
2004 MAY 21 PM 3:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03122003 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3499527	Applied For Not Applicable
5. Certificate of Status Desired X \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent WELTON, MARY ANN 2034 DROYLSDEN LANE EUSTIS, FL 32726	DO NOT WRITE IN THIS SPACE
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning.) DATE _____

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WELTON, THOMAS 2034 DROYLSDEN LANE EUSTIS, FL 32726
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST WELTON, MARY ANN 2034 DROYLSDEN LANE EUSTIS, FL 32726
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05/24/04-01073-013 **558.75

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5/21*

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *Thomas L. Welton* **5-18-04** **352-589-2806**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone
Mary Ann Welton **5-18-04** **352-589-2806**