

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000033199

Entity Name: A. WILLIAMS ELECTRIC COMPANY

FILED  
Apr 20, 2006  
Secretary of State

## Current Principal Place of Business:

13804 N BOULEVARD  
TAMPA, FL 33613 US

## New Principal Place of Business:

9115 LAZY LANE  
TAMPA, FL 33614 US

## Current Mailing Address:

PO BOX 280015  
TAMPA, FL 336820015 US

## New Mailing Address:

FEI Number: 59-3506280

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COOPER, B. EDGAR  
10220 US HIGHWAY 19 NORTH  
PORT RICHEY, FL 34668 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: P ( ) Delete  
Name: WILLIAMS, ANDRE  
Address: 13804 N BOULEVARD  
City-St-Zip: TAMPA, FL 33613

Title: S ( ) Delete  
Name: WILLIAMS, VALERIE  
Address: 13804 N BLVD  
City-St-Zip: TAMPA, FL 33613

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: VALERIE WILLIAMS

SECR

04/20/2006

Electronic Signature of Signing Officer or Director

Date