

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2004 8:00 am
Secretary of State

02-26-2004 90001 014 ***150.00

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1. Entity Name
POWERPLUS ELECTRIC, INC.

Principal Place of Business
**309 S. PALAFOX ST
PENSACOLA, FL 32501**

Mailing Address
**PO BOX 13145
PENSACOLA, FL 32591**

54011787



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02192004 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number
59-3537086

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TIDWELL, DON E
100 FT. PICKENS RD #208
PENSACOLA BEACH, FL 32561**

Name **Tidwell, Donald E.**

Street Address (P.O. Box Number is Not Acceptable)

309 S. Palafox St.

City

Pensacola

FL

Zip Code **32502**

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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **GRIFFIN, JOHNNY L.**
STREET ADDRESS **4078 CURLEW DR**
CITY-ST-ZIP **PENSACOLA, FL 32514**

TITLE **VP** ☐ Delete
NAME **TIDWELL, DONALD E.**
STREET ADDRESS **100 FT PICKENS RD #208**
CITY-ST-ZIP **PENSACOLA, FL 32561**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME **Griffin, Johnny L.**
STREET ADDRESS **309 S. Palafox St.**
CITY-ST-ZIP **Pensacola, FL 32502**

TITLE ☐ Change ☐ Addition
NAME **Tidwell, Donald E.**
STREET ADDRESS **309 S. Palafox St.**
CITY-ST-ZIP **Pensacola, FL 32502**

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address with a similar like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Donald Tidwell 02-19-04 850-429-0455

Date

Daytime Phone #