


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90453 036 ***150.00

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1. Entity Name
NELCO ELECTRIC, INC.



Principal Place of Business 24120 PRODUCTION CIR UNIT 1 BONITA SPRINGS, FL 34135	Mailing Address 24120 PRODUCTION CIR UNIT 1 BONITA SPRINGS, FL 34135
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50015339



04052006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0961789	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NELSON, DALE M
20520 TANGLEWOOD LANE
ESTERO, FL 33928

DO NOT WRITE IN THIS SPACE

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	NELSON, DALE M
STREET ADDRESS	20520 TANGLEWOOD LANE
CITY-ST-ZIP	ESTERO, FL 33928
TITLE	D
NAME	NELSON, CHARLES E
STREET ADDRESS	20520 TANGLEWOOD LANE
CITY-ST-ZIP	ESTERO, FL 33928
TITLE	O
NAME	Courten, Darrell K.
STREET ADDRESS	5625 7th Ave.
CITY-ST-ZIP	Ft. Myers, FL 33907
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Dale Nelson* **Dale Nelson** **4/7/06** **239-633-2204**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #