

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)


FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90345 036 ***150.00

0624087 AT

DOCUMENT # F02000001298

1. Entity Name
WAYCROSS WINLECTRIC CO.



Principal Place of Business
C/O DAPSCO ATLANTA CO.
1000 HURRICANE SHOALS RD., BLDG. D-500
LAWRENCEVILLE GA 30043

Mailing Address
C/O DAPSCO ATLANTA CO.
1000 HURRICANE SHOALS RD., BLDG. D-500
LAWRENCEVILLE GA 30043



2. Principal Place of Business
93 Vickers Rd

3. Mailing Address
SAME - DapSCO Atlanta

Suite, Apt. #, etc.
BLD - D, Suite 500

CHECK HERE IF MAKING CHANGES

City & State
Waycross, GA

City & State
Lawrenceville, GA

4. FEI Number
APPLIED FOR
020560247

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE **4/19/03**

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, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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	PD STEWART, RUSSELL A 93 VICKERS ROAD WAYCROSS GA 31501
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FORD, STEPHEN R 3110 KETTERING BLVD. DAYTON GA 31501
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST. MUEGEL, PHILIP E 1000 HURRICANE SHOALS ROAD - SUITE D-500 ATLANTA GA 30043
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS METZGER, DAVID E 3110 KETTERING BLVD. DAYTON GA 31501
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OSENBAUGH, JACK D 3110 KETTERING BLVD. DAYTON GA 31501
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ABBOTT, RUSSELL W 3110 KETTERING BLVD. DAYTON GA 31501

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition EVERYTHING ELSE IS THE SAME
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 all other like empowered.

SIGNATURE: **Philip E Muegel** DATE: **4/19/03** DAYTIME PHONE #: **678-377-0535**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/02)