

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000005169

FILED  
Jan 20, 2012  
Secretary of State

**Entity Name:** ELECTRICAL CONTROL SERVICE, INC.

**Current Principal Place of Business:**

145 ANDREW DRIVE SUITE 220  
STOCKBRIDTE, GA 30281

**New Principal Place of Business:**

**Current Mailing Address:**

145 ANDREW DRIVE SUITE 220  
STOCKBRIDTE, GA 30281

**New Mailing Address:**

**FEI Number:** 58-2560036

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GULF POWER COMPANY  
ONE ENERGY PLACE  
PENSACOLA, FL 32505 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

**OFFICERS AND DIRECTORS:**

Title: CDPV  
Name: SMALLWOOD, ROBERT W  
Address: 145 ANDREW DRIVE SUITE 220  
City-St-Zip: STOCKBRIDTE, GA 30281

Title: VCPV  
Name: SMALLWOOD, KRISTOPHER W  
Address: 145 ANDREW DRIVE SUITE 220  
City-St-Zip: STOCKBRIDTE, GA 30281

Title: S  
Name: SMALLWOOD, ADRIA D  
Address: 145 ANDREW DRIVE SUITE 220  
City-St-Zip: STOCKBRIDTE, GA 30281

Title: T  
Name: SMALLWOOD, LUCILLE  
Address: 145 ANDREW DRIVE SUITE 220  
City-St-Zip: STOCKBRIDTE, GA 30281

I hereby 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 all other like empowered.

SIGNATURE: ROBERT W. SMALLWOOD

CEO

01/20/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date