## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

## DOCUMENT # F97000001497

Zip

RALPH WHITE ELECTRIC COMPANY, INC.



Jan 14, 2003 8:00 am Secretary of State 01-14-2003 90054 048 \*\*\*158.75

FILED

Principal Place of Business Mailing Address 5776 REEDS BRIDGE RD 5776 REEDS BRIDGE RD RINGGOLD GA 30736

RINGGOLD GA 30736 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 62-0984014 Zip Country \$8.75 Additional 5. Certificate of Status Desired

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324

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7. Name and Address of New Registered Agent						
Name	الماليني المنظم الما			7		
Street Addre	ss (P.O. Box Numb	er is Not Ad	cceptable)	<del></del>		
			·			
City					71-0-1-	

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

SIGNATURE

FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing

\$5.00 May Be Added to Fees

Applied For

Not Applicable

Make Check Payable to Florida Department of State Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PTD TITLE ☐ Delete TITLE NAME WHITE, RALPH ☐ Change ☐ Addition NAME STREET ADDRESS 5776 REEDS BRIDGE RD STREET ADDRESS CITY-ST-ZIP RINGGOLD GA 30736 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change WHITE, RICHARD L ☐ Addition NAME STREET ADDRESS 5776 REEDS BRIDGE RD STREET ADDRESS CITY-ST-ZIP RINGGOLD GA 30736 CITY-ST-ZIP TITLE SD ☐ Delete TITLE NAME ☐ Change WHITE, JOYCE T ☐ Addition NAME STREET ADDRESS 5776 REEDS BRIDGE RD STREET ADDRESS CITY-ST-ZIP RINGGOLD GA 30736 CITY-ST-ZIP TITLE ☐ Delete TITLE NAME ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE NAME ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7(P CITY-ST-ZIP TITLE ☐ Delete TITLE NAME Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

LEWIRERichard L. White Vice President 1-10-03
E OF SIGNING OFFICER OR DIRECTOR