

## 2020 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION

Commonwealth of Virginia State Corporation Commission Office of the Clerk Entity ID: F0036204 Filing Number: 200820986191 Filing Date/Time: 08/20/2020 02:09 PM Effective Date/Time: 08/20/2020 02:09 PM



1.	COR	PORA	TION	NAME:
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**ELECTRICAL EQUIPMENT COMPANY** 

2. VA REGISTERED AGENT NAME AND OFFICE ADDRESS: OFFCR

JULIE G HILL 1807 BOULEVARD WEST RICHMOND, VA 23230-0000 DUE DATE:

09/30/20

SCC ID NO .: F003620-4

5. TOTAL NUMBER OF AUTHORIZED

SHARES: 100,000

3. CITY OR COUNTY OF VA REGISTERED OFFICE: 760-RICHMOND CITY

4. STATE OR COUNTRY OF INCORPORATION: NC-North Carolina

DO NOT ATTEMPT TO ALTER THE INFORMATION ABOVE. Carefully read the enclosed instructions. Type or print in black only.

6. PRINCIPAL OFFICE ADDRESS:

Mark this box if address shown below is correct	If the block to the left is blank or contains incorrect data please add or correct the address below.
ADDRESS: 1440 DIGGS DR	ADDRESS:
7	
	Ψ*
CITY/ST/ZIP RALEIGH, NC 27603-0000	CITY/ST/ZIP

-	DIDEATADA		
/	DIRECTORS	AND PRINCIPAL	OFFICERS

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

Mark appropriate box unless area below is blank:  Information is correct  Delete information	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below:  Correction Addition Replacement
OFFICER X DIRECTOR X	OFFICER   DIRECTOR
NAME: MARK HOLMES	NAME:
TITLE: President	TITLE:
ADDRESS: 5201 OLD GARDEN RD	ADDRESS:
CITY/ST/ZIP: WILMINGTON, NC 28403-0000	CITY/ST/ZIP:

I affirm that the information contained in this report is accurate and complete as of the date below.

SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT

PRINTED NAME AND CORPORATE TITLE

DATE

It is a Class 1 misdemeanor for any person to sign a document that is false in any material respect with intent that the document be delivered to the Commission for filing.

## **2020 ANNUAL REPORT CONTINUED**

**CORPORATION NAME:** 

ELECTRICAL EQUIPMENT COMPANY

DUE DATE: 09/30/20

SCC ID NO .: F003620-4

All directors and principal officers must be listed.

7. DIRECTORS AND PRINCIPAL OFFICERS: (continued)	An individual may be designated as both a director and an officer.
Mark appropriate box unless area below is blank:  Information is correct Information is incorrect Delete information	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below:  Correction Addition Replacement
OFFICER 🔀 DIRECTOR 🗆	OFFICER   DIRECTOR
NAME: HARRY LALBERT JR	NAME:
TITLE: CFO/S	TITLE:
ADDRESS: 105 GATESTONE CT	ADDRESS:
CITY/ST/ZIP: CARY, NC 27518-0000	CITY/ST/ZIP:
Mark appropriate box unless area below is blank:  ☐ Information is correct ☐ Delete information	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below:    Correction   Addition   Replacement
OFFICER   DIRECTOR	OFFICER   DIRECTOR
NAME: T. JACKSON LAWSON	NAME:
TITLE:	TITLE: Director
ADDRESS: 8118 RIVER ROAD	TITLE: Director ADDRESS: 14712 Spring Creek Rd. CITY/ST/ZIP: Dinwiddie, VA 23841
CITY/ST/ZIP: RICHMOND, VA 23229-0000	CITY/ST/ZIP: Dia 1/1/24 in 1/2 27 27 1
	Sillwoodie, VA 23841
Mark appropriate box unless area below is blank:  ☐ Information is correct ☐ Delete information	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below:
	If the block to the left is blank or contains incorrect data, please mark appropriate
☐ Information is correct ☐ Delete information	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below:  Correction  Addition  Replacement
☐ Information is correct ☐ Delete information  OFFICER ☐ DIRECTOR ☑	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below:  OFFICER DIRECTOR NAME:
□ Information is correct □ Information is incorrect □ Delete information  OFFICER □ DIRECTOR ☑  NAME: DENNIS CLARK	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below:  OFFICER DIRECTOR
☐ Information is correct ☐ Information is incorrect ☐ Delete information  OFFICER ☐ DIRECTOR ☒  NAME: DENNIS CLARK  TITLE:	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below:  OFFICER   DIRECTOR    NAME:  TITLE: Director
OFFICER DIRECTOR NAME: DENNIS CLARK TITLE: ADDRESS: 212 MIDDLETON PLACE	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below:  OFFICER   DIRECTOR    NAME:  TITLE: Director  ADDRESS:
OFFICER DIRECTOR NAME: DENNIS CLARK TITLE: ADDRESS: 212 MIDDLETON PLACE CITY/ST/ZIP: CHAPEL HILL, NC 27516-0000  Mark appropriate box unless area below is blank:	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below:  OFFICER DIRECTOR D
OFFICER DIRECTOR NAME: DENNIS CLARK TITLE: ADDRESS: 212 MIDDLETON PLACE CITY/ST/ZIP: CHAPEL HILL, NC 27516-0000  Mark appropriate box unless area below is blank: Information is correct Delete information	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below:  OFFICER   DIRECTOR    NAME:  TITLE: Director  ADDRESS:  CITY/ST/ZIP:  If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below:   Correction   Addition   Replacement
OFFICER DIRECTOR NAME: DENNIS CLARK TITLE: ADDRESS: 212 MIDDLETON PLACE CITY/ST/ZIP: CHAPEL HILL, NC 27516-0000  Mark appropriate box unless area below is blank: Information is correct Information Delete information  OFFICER DIRECTOR DIRECTOR	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below:  OFFICER   DIRECTOR    NAME:  TITLE: Director  ADDRESS:  CITY/ST/ZIP:  If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below:   Correction   Addition   Replacement    OFFICER   DIRECTOR
OFFICER DIRECTOR NAME: DENNIS CLARK TITLE: ADDRESS: 212 MIDDLETON PLACE CITY/ST/ZIP: CHAPEL HILL, NC 27516-0000  Mark appropriate box unless area below is blank: Information is correct Delete information  OFFICER DIRECTOR NAME: JEFFREY KNIGHT	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below:  OFFICER DIRECTOR D



Electrical Equipment Company 2020 Annual Report Corporate ID F0036204

## Officers

Mark K. Holmes
President and CEO
5201 Old Garden Road
Wilmington, NC 28403

Harry L. Albert, Jr.
Chief Financial Officer / Secretary
105 Gatestone Ct.
Cary, NC 27518

Jeffrey D. Knight
Chief Operating Officer
9805 San Remo Place
Wake Forest, NC 27587

## **Board of Directors**

Stephanie Garrison Director 3309 Leonard Street Raleigh, NC 27607

John M. Gore Director 1009 Winona Road Raleigh, NC 27609

Dennis B. Clark
Director
212 Middleton Place
Chapel Hill, NC 27516

Thomas E. Pientok
Director
1522 Ridge Top Drive, NE
Swisher, IA 52338

Julie G. Hill
Vice President of Human Resources
12330 Point Landing Court
Midlothian, VA 23112

Calvin Marshall Fox, III
Vice President of Sales, Virginia Group
14478 Riverside Drive
Ashland, VA 23005

Dennis Cogan
Vice President of Sales, NC/SC/GA Group
522 Plymouth Pass Drive
Lexington, SC 29072

Robert W. Thomason
Director
629 W. Cheroke Avenue
Cartersville, GA 30120

Thomas A. Rogers
Director
4339 Naylors Beach Road
Warsaw, VA 22572

T. Jackson Lawson
Director
8118 River Road
Richmond, VA 23229

Patrick J. Burns

Director
2810 St. Regis Road

Greensboro, NC 27408

Benjamin Mondics
Director
7511 Vinemont Ct.
Hunson, OH 44236