## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # 305550

SPARTON ELECTRONICS ELORIDA INC

OFAITO	LECOMONIOS TEOMON	,						
Principal Plac	ce of Business	Mailing Address				JE BLEIL OWN GIUN	ł Biori Dieti Oldu i	B(BL) DIDII LOBI
C/O RICHARD	LANGLEY	C/O RICHARD LANGLEY						
2400 EAST GANSON STREET 2400 EAST GANSON STREE		EET		DO NOT II	OTT IN THE	·- 0010F		
JACKSON MI 49202 JACKSON MI 49202					VRITE IN TH	IS SPACE		
					3. Date Incorporated or Qualif	fed		
2 O-mainal D	Y (D.::	To Marine Address			05/24/1966			
	Place of Business	2a. Mailing Address			4. FEI Number		<b>⊢</b>	pplied For
21 Suite Ant	# -4-	26 Suite Apt # sta			59-1151346			ot Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	t 🗆		Additional equired
22 City & Stat	<b>5</b> 0	City & State						•
23	ie –	<u></u>	, .		6. Election Campaign Financia Trust Fund Contribution	ng 🗆		May Be
Zip	Country	Zip	Country		Trust Fund Contribution			to Fees
24	25	29	30		This corporation owes the of Personal Property Tax.	current year i	ntangible □ Yes	□No
24	9. Name and Address of Current		30		10. Name and Address of Ne	w Registere		LINU
	Signal Audited St. Court of the St. Cour	Lahisteren Whour	81	Name	(V. Hallic alla madross V. III	w ivediare.	u Agent	
CT (	CODDODATION SYSTEM							•
SP 1200	S PINE ISLAND ROAD	M.	82	Street Addres	ss (P.O. Box Number is Not Acce	eptable)		
PLAI	NTATION FL 33324		83		1 75 - 1 6 6 10 1 1 10 1 10 1 10 10 10 10 10 10 10 1	11 1 10 <b>2</b> 20 日報	4179 4187 31811 4	\$12 E1719 (A.2)
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14. 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 annual report or supplemental annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed; or principle with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE

CITY-ST-ZIP

**FILED** 

Feb 08, 1999 8:00am

**Secretary of State** 

02-08-1999 90058 002 \*\*\*150.00

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