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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

FORWARD ELECTRICAL CONTRACTORS OF FLORIDA, INC.

Principal Place of Business Mailing Address						//I BEDIO 03011 BISI DIS	/// B/B// 1881	
1305 S DIXIE HWY H 1305 S DIXIE HWY H STUART FL 34994 STUART FL 34994		l						
SIUMNI PL S	14394	STUART FL 34994				DO NOT WRITE IN	THIS SPACE	
						3. Date Incorporated or Qualified	THO OF AGE	
						03/09/1976		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	I A	pplied For
21		26				59-1688597		lot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired		Additional	
27								lequired
23	e e	26 City & State	¬ '			6. Election Campaign Financing Trust Fund Contribution		May Be
Zip	Country	7 _{IP}	Coi	untry		This corporation owes or has paid the state of the s		to Fees
24	25	29	30	,		Personal Property Tax due June 30.		itangible □ No
	9. Name and Address of Curr				**. **	10. Name and Address of New Regist		
	CKEEN, W. THOMAS			81	Name			
401 E OCEAN BLVD				82	Street Address	ss (P.O. Box Number is Not Acceptable)		
RIVER OAK PLAZA				0110017100101				
ST	UART FL 34994			83	•			
				84	City		 85 Zip	Code
					•			
11. Pursuant office or r	to the provisions of Sections 607.05 egistered agent, or both, in the Sta	502 and 607.1508, Florida Sta ite of Florida. Such change w	atutes, the a as authorize	bove-	named corporation	ration submits this statement for the purpour's heard of directors. I hereby accept the	ose of changing i	ts registered
agent. La	m familiar with, and accept the obli	igations of, Section 607.0505	, Florida Sta	tutes.		n's board of directors. I hereby accept the	s appointment as	rogistered
SIGNATURE	Signature, typed or printed name of registered a	broad and filled as a cookle	NOTE D. C.		t signature required		NATE	
12.		ND DIRECTORS	13.	A Agen	s signature required	ADDITIONS/CHANGES TO OFFICERS		RS IN 12
TITLE	VS	DELETE	1.1 T	ITLE		7.00110.107017.17020 10 0111021	Change	Addition
NAME	Carson, William G		1.2 N	AME			•	
STREET ADDRESS	1900 SE HACKMAN TERR		1.3 \$	TREET A	DDRESS			
CITY-ST-2IP	STUART FL		1.4 C	ITY-ST-	. ZIP			
TITLE	PT DELETE 2.11		ITLE			Change	Addition	
NAME	TAYLOR, DOUG		2.2 N	AME	ļ			
STREET ADDRESS	5031 S E GREAT POCKET	TR	2.3 S	TREET A	DORESS			
CITY - ST - ZIP	STUART FL		2.40	ITY-ST	- ZIP			
TITLE	DFLETE 3.11		TLE			Change	Addition	
NAME			3.2 N	AME				
STREET ADDRESS			3.3 S	TREET A	DORESS			
CITY-ST-ZIP				HY-ST	- ZIP			
TITLE		☐ DELETE	4.1 TI				☐ Change	Addition
NAME			4. 2 N					
STREET ADDRESS				TREET A	- 1			
CITY-ST-ZIP TITLE		DELETE		ITY-ST-	ZIP		По	1.000
I			5.1 Ti				L Change	☐ Addition
NAME STOCET ADDROCCE			5.2 N					
STREET ADDRESS				TREET A				
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CI 6.1 TI	TY-ST-	ZIP		Change	Addition
NAME			6.2 N				in change	ET MOUNTAIN
12 WHILE			0.2 N/	MATE				

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 roport or supplemental annual roport 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 roceiver 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 on an attachment with an address.

6.3 STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

3-25-98

FILED

Mar 31 1998 8:00am

Secretary of State