

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Jan 08, 2001 08:00 AM**
Secretary of State**DOCUMENT # G45566**1. Entity Name
MEISNER ELECTRIC INC. OF FLORIDAPrincipal Place of Business
220 NE 1ST ST.

DELRAY BCH FL 33444
Mailing Address
220 NE 1ST ST.

DELRAY BCH FL 334442. Principal Place of Business
220 NE 1ST ST.3. Mailing Address
220 NE 1ST ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
DELRAY BEACH FLCity & State
DELRAY BEACH FL4. FEI Number
59-2312811Applied For
Not ApplicableZip
33444

Country

Zip
33444

Country

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent**ONNEN, JANET
220 NE 1ST ST.

DELRAY BCH FL 33444

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

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

(NOTE: Registered Agent signature required when reinstating)

01/08/2001

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE T
NAME HUTCHINSON DOUGLAS B ☐ Delete
STREET ADDRESS 220 NE 1ST ST
CITY-ST-ZIP DELRAY BEACH FLTITLE T ☒ Change ☐ Addition
NAME HUTCHISON DOUGLAS B
STREET ADDRESS 220 NE 1ST ST
CITY-ST-ZIP DELRAY BEACH FLTITLE MDS ☐ Delete
NAME ONNEN, JANET I
STREET ADDRESS 220 NE 1ST STREET
CITY-ST-ZIP DELRAY BCH. FLTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE V ☐ Delete
NAME MCCORMICK, MARK
STREET ADDRESS 220 NE 1ST STREET
CITY-ST-ZIP DELRAY BCH FLTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE DP ☐ Delete
NAME ONNEN, TIM D
STREET ADDRESS 220 NE 1ST STREET
CITY-ST-ZIP DELRAY BCH. FLTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOUGLAS B. HUTCHISON

T

01/08/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)

ROGER CASEBOLT, V
220 NE 1ST STREET

DELRAY BEACH, FL 33444