

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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95 MAY -1 AM 3:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Martinum
Secretary of State
DIVISION OF CORPORATIONS



DOCUMENT # **H32320** (4)

1. Corporation Name
ROY'S ELECTRICAL SERVICE, INC.

Principal Place of Business: **385 NIEUPORT DRIVE VERO BEACH FL 32968**

Mailing Address: **385 NIEUPORT DRIVE VERO BEACH FL 32968**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date incorporated or qualified	3a. Date of Last Report
21		26		12/03/1984	04/05/1994
22 State Apt # etc		27 State Apt # etc		4. FEI Number	Applied For
23 City & State		28 City & State		59-2465435	Not Applicable
24		25		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
29		30		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24		25		7. This corporation complies with the requirements of Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CLARK, ROBERT C. 1642 20TH ST. VERO BEACH FL 32960				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			

11. Pursuant to the provisions of Sections 607.01(1)(b) and 607.1508, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered agent to be in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the provisions of Sections 607.01(1)(b), Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
OFF	PTD PINNAR, ROY 385 NIEUPORT DRIVE VERO BEACH FL	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2. NAME	
STREET ADDRESS		3. STREET ADDRESS	
CITY, STATE		4. CITY, STATE	
OFF		5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6. NAME	
STREET ADDRESS		7. STREET ADDRESS	
CITY, STATE		8. CITY, STATE	
OFF		9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		10. NAME	
STREET ADDRESS		11. STREET ADDRESS	
CITY, STATE		12. CITY, STATE	
OFF		13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		14. NAME	
STREET ADDRESS		15. STREET ADDRESS	
CITY, STATE		16. CITY, STATE	

14. I hereby certify that the information supplied with this report is voluntarily furnished and does not qualify for the exemption stated in Sections 607.01(1)(b), Florida Statutes. I further certify that the information included on this report is of supplemental annual report as from and on a date and that my signature shall have the same legal effect as if made on the date that I was an officer or director of the corporation at the time of the receipt of the report or on a date and that my signature appears in Block 13 of this report as a change of an officer or director with an address.

SIGNATURE:  **Roy Pinnar** 4-28-95 1-407-778-0707

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR