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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H91915

(9)

MUNSON AND BRYAN ELECTRIC COMPANY, INC.

Principal Prace of Basiness Mailing Address					I LABOLDII BUID IAIDU AIDIE EDEBU IIADI BUIL	DENIN DIDIN DIDIN DIDIN DIDIN DI	
3434 ST AUGUS JACKSONVILLE		3434 ST AUGUSTINE RO JACKSONVILLE FL 32207	4 ST AUGUSTINE RO CKSONVILLE FL 32207-5570				
					3. Date Incorporated or Qualified 12/30/1985	3a. Date of Last Re 02/26/1996	port
2. Principal fo	ace of Business	2a, Mailing Address			4. FEI Number	Apr	olied For
21		26	· · · · · · · · · · · · · · · · · · ·		59-2625603	~~~~ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Applicable
Suite Apt a		Suite, Apt. #, etc.	27		5. Certificate of Status Desired \$8.75 Additional Fee Required		
City & State	!	City & State			6. Election Campaign Financing	\$5.00 #	
23] Zip	Zip Zip		Country		Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032,		
24	• · - · · ·	25 29 30			Florida Statutes X Yes No		
	9. Name and Address of Curr		1-21		10. Name and Address of New Re		
MEID	E, JR., MOSES		81	Name			
	N. MAIN ST.		82	Street Add	ress (P.O. Box Number is Not Acceptab	le)	
JACK	(SONVILLE FL 32202						
			83				İ
			84	City		85 Zip C	ode
						FL	
office or n	ea stered agent, or both, in the Sta	ate of Florida. Such change was	authorized by	the corporat	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing its it the appointment as r	registered egistered
	ni fan Ear with, and accept the ob	ligations of, Section 607,0505, F	lorida Statutes	i.			
SIGNATURE	Bigniture typed or printed name of registered.	agent and to oil applicable (NC	OTE: Registered Age	nt signature requi	red when reinstating)	DATE	
12.	OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS	3 IN 12
11114	DVT	☐ DELETE	1.1 TITLE			Change	Addition
NAME	BRYAN, JOHNNIE R.		1.2 NAME				
STREET ADDRESS	9905 MARGATE HILLS ROAL)	1.3 STREET	ADDRESS			
OHY- ST ZIP	JACKSONVILLE FL		1.4 CITY - S	T-ZIP			
1:ftE	DPS DELETE		21 TITLE			L Change	Addition
NAME	MUNSON, FRED W. 125 PINE LOOP RD.		2.2 NAME				
STREET ACIDRESS	GLEN ST MARY FL	2 3 STREET ADDRE					
04Y-81-769 1404	DEL DEL		2 4 CITY-ST-ZIP 3.1 TITLE			Change	Addition
NAME.			3.2 NAME	ļ		ondigo	raddition
STHEET ATURESS			3.3 STHEET	ADDRESS			
City-S1 ZiP			3.4. CITY-5				
181.E		DELETE	41 TITLE			Change	Addition
NAME			4 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CI*Y \$1 7(f)			44 CITY-S	T-ZIP			
HT.E		DELETE	5 1 TITLE			Change	Addition
NAMI			5.2 NAME				
53ЯНО ДЭБНЭS - ¹			5.3 STREET				
CHY-S1-70		The ere	5.4 CITY - S	T-ZIP		T 25	The same of
111.5	•	L_J DELETE	61 TITLE			☐ Change	☐ Addition
NAME CONTRACTOR			6.2 NAME	4000000			
S RELLADOPUNG			63 STREET				
0dv_St_ZiP	by certify that the information supp	blied with this filing does not aux	6.4 CITY-S alify for the exe	mption state	d in Section 119.07(3)(i), Florida Statute	s. I further certify that t	he
ofernatio Fam au of	ri indicated on this annual report o	or supplemental annual report is our the receiver or trustee empo	true and accu owered to exec	irate and that	it my signature shall have the same lega rt as required by Chapter 607, Florida S	l effect as if made und	ler oath; that

(904) 396–6689

FILED

Feb 27 1997 8:00am

Secretary of State