2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J98755

1. Entity Name

CENTRAL STATE ELECTRIC, INC.



FILED Mar 31, 2003 8:00 am Secretary of State 03-31-2003 90294 045 ***150.00

Principal Place of Business 19030 1ST STREET. N.E. LUTZ FL 33549		Mailing Address 19030 1ST STREET, N.E. LUTZ FL 33549									
2. Principal Place of Business		3. Mailing Address					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 	/ 01831 B/O	! 	HEN BIBN 1881	
Suite, Apt. #, etc.		Suite, Apt. #, etc.					. CHECK HERE IF MAKING CHANGES				
City & State		City & State				4. F	4. FEI Number 59-2851240 Applied For Not Applical			pplied For ot Applicable	
Zip Country		Zip	Zip		Country		Certificate of Status Desired [8.75 Ad ee Require		
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent						
					Name						
MORROW, ROBERT 18914 5TH ST SW					Street Address (P.O. Box Number is Not Acceptable)						
LUTZ FL 33549											
			•		City			FL	Zip Cod	le	
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OATE											
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State							Election Campaign Financ Trust Fund Contribution.	ing 🔲		00 May Be d to Fees	
10. OFFICERS AND DIRECTORS 11						AD	L DITIONS/CHANGES TO OFFICER	RS AND	DIRECTOR	RS IN 11	
TITLE	PD	□ Delete		TITL		,,,,	DITIONO, OF BANACO TO COTTOE		☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	MORROW, ROBERT N SR. 18914 5TH ST. SW LUTZ FL 33549		Dolate		EET ADDRESS -ST-ZIP						
TITLE NAME STREET ADDRESS	VPD MORROW, THOMAS W 18204 ABBY LANE		☐ Delete		IE EET ADDRESS				☐ Change	☐ Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MORROW, NELSON L 19019 3RD ST NE	` .	☐ Delete	TITL NAM STRI	Y-ST-ZIP E EET ADDRESS Y-ST-ZIP	·	and the second s	-	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LUTZ FL 33549		☐ Delete	TITL NAM STRI	E				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-2IP			☐ Delete	TITL NAM STRI	E				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·		☐ Delete	CITY	IE EET ADDRESS '-ST-ZIP				☐ Change	Addition	
12. I hereby	pertify that the information supplied with	this filing	does not qualify for	the exe	emption stated in	Section	119.07(3)(i), Florida Statutes. I furt	ther certi	ty that the i	intermation	

port is true and accurate and that my signature sharmave the same legal energy and accurate and maintain an another of objects of empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receiver or trus changed, or on an attachment with an

SIGNATURE:

Daytime Phone #