

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

FILED
May 01 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L36485 (5)
 1. Corporation Name
DON CANNON ELECTRIC, INC.



Principal Place of Business 6301 FORT PIERCE BLVD FT PIERCE FL 34951	Mailing Address 6301 FORT PIERCE BLVD FT PIERCE FL 34951
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/13/1989	
21	22	26	27	4. FEI Number 65-0166919	Applied For <input type="checkbox"/> Not Applicable
23 City & State		28 City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24 Zip		29 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25 Country		30 Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
PHILLIPS, KENDALL J THE BOSTON HOUSE 238S INDIAN BLVD DR FT PIERCE FL 34950				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				FL	85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, 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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD CANNON, DONALD JOSEPH	1.1 TITLE	TREASURER
NAME	6301 FORT PIERCE BLVD	1.2 NAME	RITA CANNON
STREET ADDRESS	FT PIERCE FL	1.3 STREET ADDRESS	6301 FORT PIERCE BLVD
CITY-ST-ZIP		1.4 CITY-ST-ZIP	FT PIERCE FL
TITLE	VD FOSTER, ARTHUR DOUGLASS	2.1 TITLE	SECRETARY
NAME	734 DELAWARE AVE.	2.2 NAME	SEAN J. WEBB
STREET ADDRESS	FT PIERCE FL	2.3 STREET ADDRESS	6301 FORT PIERCE BLVD
CITY-ST-ZIP		2.4 CITY-ST-ZIP	FT PIERCE FL
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Don Cannon* **DON CANNON** *4/23/98* *524-461-8300*

CR2E034 (10/97)