

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2002 8:00 am
Secretary of State
 05-14-2002 90284 030 ***158.75

DOCUMENT # P95000037141

1. Entity Name
T AND T ELECTRIC, INC.

Principal Place of Business

**4250 DOW ROAD
 UNIT 306
 MELBOURNE FL 32934**

Mailing Address

**791 ARUNDO AVE NE
 PALM BAY FL 32905**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

4250 DOW ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Unit 306

City & State

City & State

Melbourne FL

Zip

Country

Zip

Country

32934

USA

4. FEI Number

59-3318422

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**BUTERBAUGH, TY D
 791 ARUNDO AVE NE
 PALM BAY FL 32905**

7. Name and Address of New Registered Agent

Name

Ty DANIEL BUTERBAUGH

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

4929 Worthington Circle

City

Rockledge

FL

Zip Code

32955

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

Ty DANIEL Buterbaugh Pres.

04-26-02

(NOTE: Registered Agent signature required when installing)

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, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **VP** ☐ Delete
 NAME **THOMAS M. BUTERBAUGH**
 STREET ADDRESS **2915 POMELO ROAD**
 CITY-ST-ZIP **MALABAR FL**

TITLE **ST** ☐ Delete
 NAME **BUTERBAUGH, CONNIE R**
 STREET ADDRESS **2915 POMELO ROAD**
 CITY-ST-ZIP **MALABAR FL 32950**

TITLE **P** ☐ Delete
 NAME **BUTERBAUGH, TY D**
 STREET ADDRESS **791 ARUNDO AVE NE**
 CITY-ST-ZIP **PALM BAY FL 32905**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
 NAME **Ty DANIEL BUTERBAUGH**
 STREET ADDRESS **4929 Worthington Circle**
 CITY-ST-ZIP **Rockledge FL 32955**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ 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: *[Signature]*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-26-02 321 729 9679
 Date Daytime Phone #

CR2E034 (9/01)