Applied For Not Applicable



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600007840

1. Corporation Name

SNELGROVE ELECTRONICS INC.

Principal Place of Business

2. Principal Place of Business

Mailing Address

12818 MLK BLVD ALACHUA FL 32615

21

P.O. BOX 1513

2a. Mailing Address

26

HIGH SPRINGS FL 32655

FILED Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90038 001 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

01/22/1996 4. FEI Number

59-3353421

27 Fee Required	Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired		ຸ ຈຸ8.75 ⁄	
Zip	22		27					Fee Re	quired
23	,	e	City & State			6. Election Campaign Financing	П	\$5.00	May Be
20	23		28			Trust Fund Contribution	<u> </u>	Added t	o Fees
SNELGROVE, DIANA H 210 NW 1ST AVE HIGH SPRINGS FL 32643 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 agent. I mainlier with, and accept the obligators of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I mainlier with, and accept the obligators of Sections 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TILL PD OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TILL PD OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TILL OFFICERS AND DIRECTORS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TILL OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TILL OFFICERS AND DIRECTORS IN 12 TILL OFFICERS AND DIRECTORS IN 12 TILL OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TILL OFFICERS AND DIRECTORS IN 12 TILL OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TILL OFFICERS AND DIRECTORS I		Country Zip		Country	ountry 8. This corporation owes the current year Intane		angible		
Section Sect	24	25 29 30			Personal Property Tax. Yes No				
SNELGROVE, DIANA H 210 NW 1ST AVE HIGH SPRINGS FL 32643 88		9. Name and Address of Current	Registered Agent			10. Name and Address of New I	Registered	Agent	
210 NW 1ST AVE HIGH SPRINGS FL 32643 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 607.0505, 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 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE 14. OFFICERS AND DIRECTORS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. OFFICERS AND DIRECTORS IN 12 17. OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10. NAME STREET ADDRESS 11. Change Addition				81	Name				
210 NW 1S1 AVE HIGH SPRINGS FL 32643 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutus, the above-named corporation submits this statement for the purpose of changing its 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, 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, and accept the obligations of, Section 607.0005, Florida Statutes. SIGNATURE SIGNATURE Signature, typed or printed remain of inspassed agent and the if appreasable. INOTE: Registered Appril appellation submits in the statement for the purpose of changing its registered agent and remained with a statement for the purpose of changing its registered agent. In a final accept the obligations of, Section 607.005, Florida Statutes. INOTE: Registered Appril appellation submits for the purpose of changing its registered agent. In a final accept the obligation of, Section 607.005, Florida Statutes. INOTE: Registered Submits in advantaged and remained agent and the if appreasable. IN AME SNELGROVE, WAYNE 1.3 TIME SNELGROVE, WAYNE 1.3 TIME VD OBLETE 2.1 TIME OChange Addition Addition SNELGROVE, DIANA SNELGROVE, DIANA 1.3 TIME OCHANGE Addition Addition Addition Addition Addition Addition Addition Addition Change Addition Change Addition Addition Change Addition Addition Addition Addition ADARPY, DEIDRE S STREET ADDRESS STREET	210 NW 1ST AVE			92 Street Address (P.O. Box Number is Not Accentable)					
### City ### 15 Zip Code ### 1. Pursuant to the provisions of Sections S07.0502 and S07.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. In a familiar with, and accept the obligations of, Section 807.0505, Florida Statutes. #### Signature ### 13									
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TILE PD DELETE 17 THE VD DELETE 1 THE STREET ADDRESS THICK SPRINGS FL 32643 DELETE 21 STREET ADDRESS TREET ADDRESS					<u> </u>			··	
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SIGNATURE Signature. Typed or printed name of registative sort (NOTE: Registered Agent sopreture required when rehistating) 12. OFFICERS AND DIRECTORS STREET ADDRESS PD DELETE 12. NAME SNELLGROVE, WAYNE 12. NAME SNELLGROVE, WAYNE 12. NAME SNELLGROVE, WAYNE 12. NAME SNELLGROVE, DIANA H STREET ADDRESS CITY-ST-ZP HIGH SPRINGS FL 32643 13. STREET ADDRESS CITY-ST-ZP HIGH SPRINGS FL 32643 14. CITY-ST-ZP HIGH SPRINGS FL 32643 12. NAME SNELLGROVE, DIANA H STREET ADDRESS CITY-ST-ZP HIGH SPRINGS FL 32643 22. NAME SNELLGROVE, DIANA H STREET ADDRESS CITY-ST-ZP HIGH SPRINGS FL 32643 23. STREET ADDRESS CITY-ST-ZP HIGH SPRINGS FL 32643 24. CITY-ST-ZP HIGH SPRINGS FL 32643 25. NAME STREET ADDRESS CITY-ST-ZP HIGH SPRINGS FL 32643 26. NAME STREET ADDRESS CITY-ST-ZP HIGH SPRINGS FL 32643 35. STREET ADDRE	office or n	egistered agent, or both, in the State o	of Florida. Such change was autho	orized by	the corporation	's board of directors. I hereby acce	ot the appoi	ntment as re	gistered
12	agent. I a	m familiar with, and accept the obligate	ions of, Section 607.0505, Florida	Statutes.					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	SIGNATURE						DATE		
TITLE	12			<u> </u>	t signature required v			D DIRECTO	RS IN 12
NAME						ADDITIONATOR TO GE	TOLITO 7		
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CITY_ST-ZP					}				
TITLE	STREET ADDRESS								-
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STREET ADDRESS CITY-ST-ZIP	TITLE	VD .	. DELETE	2.1 TITLE	ţ			☐ Change	☐ Addition
CITY-ST-ZIP	NAME	Snelgrove, Diana H		2.2 NAME					
TITLE	STREET ADDRESS	210 NW FIRST AVE.		2.3 STREET	ADDRESS				
NAME	CITY-ST-ZIP	HIGH SPRINGS FL 32643		2, 4 CITY-S	T-ZIP				
STREET ADDRESS 120 NW 2ND STREET 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 1TILE Change Addition Addi	TITLE	SD	☐ DELETE	3.1 TITLE		-		☐ Change	Addition
STREET ADDRESS STRE	NAME	PAYNE, AMANDA S		3.2 NAME	1				
STREET ADDRESS STRE	STREET ADDRESS	120 NW 2ND STREET		3,3 STREET	ADDRESS				
TITLE				34. CITY-S	T-ZIP				
NAME DARBY, DEIDRE S 4.2 NAME 4.3 STREET ADDRESS 2385 MCFARLANE AVE 4.3 STREET ADDRESS LAKE CITY FL 32025 4.4 CITY-ST-ZIP D		T	☐ DELETE				***	Change	Addition
STREET ADDRESS 2385 MCFARLANE AVE		DARRY DEIDRE S		4,2 NAME	1	•			
CITY-ST-ZIP	1	T		43 STREET	ADDRESS				-
TITLE D DELETE 5.1 TITLE Change Addition NAME MOORE, CHARLENE S 52 NAME 52 NAME 53 STREET ADDRESS 5010 12TH NE SOUTH 53 STREET ADDRESS 54 CITY-ST-ZIP 54 CITY-ST-ZIP Change Addition NAME NAME 62 NAME 63 STREET ADDRESS 53 STREET ADDRESS 54 CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 65 CITY-ST-ZIP					ł				
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CITY-ST-ZIP 6.4 CITY-ST-ZIP	NAME								
UIT-51-2F	STREET ADDRESS				l l				
	CITY-ST-ZIP			6.4 CITY-ST	r-ZIP			··· · · · · · ·	

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, with all other like empowered.

CR2E034 (11/98)