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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS CITY-ST-ZIP



ELORIDA DEPARTMENT DE STATE

FILED

Mar 09 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P95000044488 (1) DOCUMENT #

FITZPATRICK ELECTRICAL INC

Principal Place of Business Mailing Address 4006 SUNRISE BLVD 4006 SUNRISE BLVD FT PIERCE FL 34962 FT PIERCE FL 34987 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/01/1995 4. FEI Number 2. Principal Place of Business 2a, Mailing Address Applied For 65-0624300 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Zip 70 8. This corporation owes or has paid the current year Intangible 25 29 Personal Property Tax due June 30. ☐ Yes 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name FITZPATRICK, JERRY M 4006 SUNRISE BLVD Street Address (P.O. Box Number is Not Acceptable) FT PIERCE FL 34982 City Zip Code 85 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 office or registered agent, or both, in the State of Florida. Such change was authorized by the congration's agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes Secret OFFICERS AND DIRECTORS 12. 13. CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change ☐ Addition TITLE FITZPATRICK, JERRY M NAME 1.2 NAME 4006 SUNRISE BLVD STREET ADDRESS 1.3 STREET ADDRESS FT PIERCE FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 2.1 TITLE Change Addition FITZPATRICK, ANTHONY C NAME 2 2 NAME 2602 SO 16TH ST STREET ADDRESS 2.3 STREET ADDRESS FT. PIERCE FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE FITZPATRICK, TONI 3.2 NAME NAME 4006 SUNRISE BLVD STREET ADDRESS 3.3 STREET ADDRESS FT PIERCE FL CITY-ST-ZIP 3.4. CITY-S1-ZIP DELETE Change Addition 41 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CHTY-ST-ZIP DELFTE Change Addition 5.1 TOLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change 6 1 TITLE TITLE 6 2 NAME NAME

14. Thereby 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 suppliemental 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:

6 3 STREET ADDRESS

64 CITY-ST-ZIP