

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2003 8:00 am
Secretary of State

04-22-2003 90052 022 ***150.00

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DOCUMENT # 188321

1. Entity Name
DICKERSON ELECTRIC COMPANY, INCORPORATED



Principal Place of Business
5633 NW 8TH STREET
5633 N W 8TH ST
MARGATE FL 33063
US

Mailing Address
5633 NW 8TH STREET
5633 N W 8TH ST
MARGATE FL 33063
US

2. Principal Place of Business
1422 SW 30th Street
Suite, Apt. #, etc.

3. Mailing Address
1422 SW 30th Street
Suite, Apt. #, etc.

City & State
Ft Lauderdale, FL 33315

City & State
Ft Lauderdale, FL

4. FEI Number **59-0751766**

Applied For
Not Applicable

Zip Country
33315 USA

Zip Country
33315 USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

SCHNEIDER, CHARLES H
1422 SW 30 ST
FT LAUDERDALE FL 33315

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 *Charles H. Schneider*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4-14-2003
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **VS** ☐ Delete
NAME **SCHNEIDER, SHARON L.**
STREET ADDRESS **1422 S.W. 30TH ST.**
CITY-ST-ZIP **FT LAUDERDALE FL**

TITLE **PD** ☐ Delete
NAME **SCHNEIDER, CHARLES H.**
STREET ADDRESS **1422 SW 30TH STREET**
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. 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

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CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Charles H. Schneider
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-14-2003
Date

(954) 972-3333
Daytime Phone #

CR2E034 (10/02)