

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 MAY 26 AM 9:41

DOCUMENT # 216133 (9)

1. Corporation Name

UNITED ELECTRIC COMPANY OF JACKSONVILLE

Principal Place of Business

Mailing Address

**5716 ST AUGUSTINE ROAD
JACKSONVILLE FL 32207**

**5716 ST AUGUSTINE ROAD
JACKSONVILLE FL 32207**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/07/1958

3a. Date of Last Report

04/20/1994

4. FEI Number

59-1746521

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒

Yes

☐

No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GRIFFIN, JOHN E JR
5716 ST. AUGUSTINE RD.
JACKSONVILLE FL**

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

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

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

**PD
GRIFFIN, JOHN E. JR.
5716 ST. AUGUSTINE RD.
JACKSONVILLE, FL 00000**

1.1 TITLE

☐ Change ☒ Addition

NAME

STREET ADDRESS

CITY - ST - ZIP

1.2 NAME

**VD
Tyson, Thomas C.
5716 St. Augustine Rd.
Jacksonville, FL 00000**

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

TITLE

**VD
JEFFRIES, BOWER
5716 ST. AUGUSTINE RD.
JACKSONVILLE, FL 00000**

2.1 TITLE

☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY - ST - ZIP

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

TITLE

**STD
GRIFFIN, BRENDA
5716 ST AUGUSTINE RD
JACKSONVILLE, FL 00000**

3.1 TITLE

☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY - ST - ZIP

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

TITLE

**NAME
STREET ADDRESS
CITY - ST - ZIP**

4.1 TITLE

☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY - ST - ZIP

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

TITLE

**NAME
STREET ADDRESS
CITY - ST - ZIP**

5.1 TITLE

☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY - ST - ZIP

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

TITLE

**NAME
STREET ADDRESS
CITY - ST - ZIP**

6.1 TITLE

☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY - ST - ZIP

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 007, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

John E. Griffin, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John E. Griffin, Jr. 5-23-95 (904) 731-4210

Date

Telephone (Area #)