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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # 216133

UNITED ELECTRIC COMPANY OF JACKSONVILLE

Principal Place of Business Mailing Address								
5716 ST AUGUSTINE ROAD 5716 ST AUGUSTINE						•		
JACKSONVILLE FL 32207 JACKSONVILLE FL 32207								
						DO NOT WRITE IN THIS SPACE		
	•					3. Date Incorporated or Qualifed		
40						10/07/1958		
2. Principal Place of Business 2a. Mailing Address						4, FEI Number Applied For		
21 26						59-1746521   Not Applicable		
Suite, Apt. #, etc.						5. Certificate of Status Desired  \$8.75 Additional		
22 27						Fee Required		
City & State City & State						6. Election Campaign Financing \$5.00 May Be		
23	28					Trust Fund Contribution Added to Fees		
Zip 	Country	Zip	Countr			8. This corporation owes the current year Intangible		
24	25		0	т		Personal Property Tax.		
9. Name and Address of Current Registered Agent					Name .	10. Name and Address of New Registered Agent		
GDIE	FIN, JOHN E JR			81	ivame .	•		
				82	Street A	treet Address (P.O. Box Number is Not Acceptable)		
5716 ST. AUGUSTINE RD.				1 100 mm 1 1				
JACKSONVILLE FL				83				
				84	City	85 Zip Code *		
				$\perp$		FL		
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 reinstating)  DATE								
12. OFFICERS AND DIRECTORS				_	signature res	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	□ DELETE	13.			Change Addition		
NAME	GRIFFIN, JOHN E. JR.	<u></u>	1.2 N					
	5716 ST. AUGUSTINE RD.				ADORESS			
STREET ADDRESS	JACKSONVILLE, FL 00000							
CITY-ST-ZIP	VD	☐ DELETE	2.1 TI	ITY-ST	-ZIP	☐ Change ☐ Addition		
TITLE						Country - Country		
NAME	JEFFRIES, BOWER		2.2 NAN					
STREET ADDRESS	5716 ST. AUGUSTINE RD.				ADDRESS			
CITY-ST-ZIP			ITY-SI	r-zip				
TITLE	STD	☐ DELETE	3.1 ∏			Change Addition		
NAME	GRIFFIN, BRENDA	•	3.2 N		ŀ			
STREET ADDRESS	5716 ST AUGUSTINE RD		3.3 S	TREET.	ADDRESS			
CITY-ST-ZIP	JACKSONVILLE, FL 00000		_	CITY-ST	r-ZIP			
TITLE	VD	DELETE	4.1 TI	TLE		☐ Change · · ☐ Addition		
,NAME	TYSON, THOMAS C		4. 2 N	IAME,				
STREET ADDRESS	5716 ST AUGUSTINE RD		4.3 S	TREET	ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL		4.4 C	ITY-ST	-ZIP	on the state of th		
TITLE		☐ DELETE	5.1 TI			☐ Change ☐ Addition		
NAME	**		5.2 N	AME				
STREET ADDRESS			5.3 S	TREET	ADDRESS			
CITY-ST-ZIP			5.4 C	TY-ST	-ZIP			
TITLE		☐ DELETE	6.1 TI	TLE		☐ Change ☐ Addition		
NAME			6.2 N	AME				
STREET ADDRESS			6.3 S	TREET	ADDRESS			

14. 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.

**SIGNATURE** 

**FILED** 

Feb 08, 1999 8:00am

**Secretary of State** 

02-08-1999 90007 019 \*\*\*150.00