

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

PROFIT  
CORPORATION  
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morham  
Secretary of State

DIVISION OF CORPORATIONS

1996 5-1-96

B-5914

C

DOCUMENT # 248340

1. Corporation Name

CROWN ELECTRIC, INC.

(2)



Principal Place of Business

P.O. BOX 101  
2325 HIGHWAY #60 EAST  
BARTOW FL 33830

Mailing Address

P.O. BOX 101  
2325 HIGHWAY #60 EAST  
BARTOW FL 33830

3. Date Incorporated or Qualified  
06/12/1961

3a. Date of Last Report  
03/20/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-0936600

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LAURENT, JOHN F.  
650 E. DAVIDSON  
BARTOW FL 33830

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P  
NAME LAURENT, JOHN  
STREET ADDRESS 650 E DAVIDSON  
CITY-ST-ZIP BARTOW FL  
☒ DELETE

1.1 TITLE P/S/T/D  
1.2 NAME DOUBERLY, K.E.  
1.3 STREET ADDRESS 305 PEACE RIVER PARK ROAD  
1.4 CITY-ST-ZIP BARTOW, FL 33830  
☐ Change ☐ Addition

TITLE D  
NAME PERIMAN, J O  
STREET ADDRESS 665 S. WILSON AVE.  
CITY-ST-ZIP BARTOW FL  
☒ DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE D  
NAME DOUBERLY, K E  
STREET ADDRESS PEACE RIVER PARK RD.  
CITY-ST-ZIP BARTOW FL  
☒ DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE STD  
NAME DOUBERLY, K.E.  
STREET ADDRESS PEACE RIVER PARK RD.  
CITY-ST-ZIP BARTOW FL  
☒ DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

5.1 TITLE VP  
5.2 NAME GANDY, DENNIS  
5.3 STREET ADDRESS 1140 NORTH MILL AVENUE  
5.4 CITY-ST-ZIP BARTOW, FL 33830  
☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
☐ Change ☐ Addition

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Kenneth E. Douberly*

May 1, 1996

(941) 533-8171

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KENNETH E. DOUBERLY

Date

Daytime Phone #

CR2E034 (12/95)