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

PROFIT CORPORATION ANNUAL REPORT



FLOR/DA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

261486

(5)

DOCUMENT #

1. Corporation Name B AND B ELECTRIC SUPPLIES, INC.

FILED May 09, 1996 08:00 AM **Secretary of State**



| Principal Place | of Business | Mailing Address | | | | | | | |
|---|--|---|---------------------------------------|---|---|---|--------------------------------|-------------------------------|---------------------------------------|
| Principal Place of Business Mailing Address C.M. SWARTZ 3340 HAVENDALE BLVD WINTER HAVEN FL 33881 Mailing Address C.M. SWARTZ 3340 HAVENDALE BLV WINTER HAVEN FL 33881 | | | | | | | | | |
| US | | US | | | 3. Date Incorporated or Qualified 08/03/1962 | or Qualified 3a. Date of Last Report 04/19/1995 | | | |
| 2. Principal Pla | ice of Business | 2a. Mailing Address 26 | | | 4. FEI Number 59-0972752 | | | Applied For Not Applicable | |
| Suite, Apt. # | l, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | | \$8.75 Additional Fee Required | | |
| City & State | | City & State | | | Election Campaign Financing Trust Fund Contribution | ing \$5.00 May Be Added to Fees | | | |
| Zip Country 25 | | Zip Country 29 30 | | | | 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No | | | |
| 24 | 9. Name and Address of Current | | 130 | | | 10. Name and Address of New Registered Agent | | | |
| | | | | 81 | Name | | | | |
| SWARTZ, C M 4923 WILLOWBROOK CIR | | | - | 82 | Street Addre | ess (P.O. Box Number is Not Acceptable) | | | |
| | HAVEN FL 33881 | | 1 | 83 | ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | |
| | | | 1 | 84 | City | | | 85 | Zip Code |
| 11. Pursuant to or registere | o the provisions of Sections 607.0502 ad agent, or both, in the State of Florid | anc 60°.1508, Florida Si la. Such change was aut | atutes, the abov norized by the co | L re-n orpo | L named corpora oration's boar | ation submits this statement for the pure of directors. I hereby accept the app | irpose of c | nanging it is register | s registered office ed agent. I am |
| familiar witi SIGNATURE | h, and accept the obligations of, Section | on 607.0505, Florida Sta | lutes. | | | | | | |
| | Signature, typed or printed manie of registered agent a | | (NOTE: Registered A | \g:= | nt signature required | | DATE | | TODO BLID |
| 12. TITLE | OFFICERS AND | DELETE | 13. | 13. 1.11/fLE | | ADDITIONS/CHANGES TO OF | FILENS AN | Chang | |
| NAME | SPRINGER, BARBARA M | | 1,2 NA3 | | | | | | 2 El Manton |
| STREET ADDRESS | 728 CANBERRA | 1,3 | | 1.3 STREET ADDRESS | | | | | |
| CITY-ST-ZIP | WINTER HAVEN FL | | | | | | | | |
| TITLE | PD | DELETE | | 2 1 TITLE 22 NAME 23 STREET ADDRESS | | | | ☐ Chang | e 🔲 Addition |
| NAME | SWARTZ, CLYDE MICHAEL | | 2 2 NAM | | | | | | |
| STREET ADDRESS | 4923 WILLOWBROOK CIR | | 2 3 STR | | | | | | |
| CITY-ST-ZIP | WINTER HAVEN FL | 2 | | 2.4 C(TY-S) - Z/P | | | | | |
| TITLE | D | ☐] DELETE 3 1 | | 3 1 THLE | | | | Chang | e 🔲 Addition |
| NAME | SPRINGER, ROBERT A | | 3.2 NA) | ME | | | | | |
| STREET ADDRESS | 728 CANBERRA | | 3.3 STI | REE | LADDRESS | | | | |
| CITY-ST-ZIP | WINTER HAVEN FL STD | | 3.4 CIT | | ST - 71P | | | | |
| TITLE | SWARTZ, CATHY | DELETE | 4. 1 TO | | | | | Chang | e 🔲 Addition |
| NAME | 4923 WILLOWBROOK CIR | | 4.2 NA | | | | | | |
| STREET ADDRESS | WINTER HAVEN FL | | | | ADDRESS | | | | |
| CITY-ST-ZIP | 711112111121112 | [] DELETE | 4.4 CIT | | 51 - ZIP | | | Chang | e Addition |
| TITLE NAME | | [_] bett tt | | 5. 1 TITLE 5.2 NAME | | | | O.IDIIQ | |
| | | | | | I ADDRESS | | | | |
| STREET ADDRESS | | | | | | | | | |
| CITY-ST-ZIP TITLE | | DELETE | 6.171 | CITY-ST-ZIP THLE | | | | Chang | e 🔲 Addition |
| NAME | | | 6.2 NA | | | | | ' | |
| STREET ADDRESS | | | | | ADDRESS | | | | |
| CITY-ST-ZIP | | | 6.4 Crt | | 1 | | | | |
| | v certify that the information supplied v | vith this filing is voluntarily | | | | or the exemption stated in Section 119 | 9.07(3)(k). F | Iorida Sta | lutes. I further |

certify that the information supplied with this litting is voluntarily turnished and does not quality 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 eath, 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 3 if changed, or on an attachment with an address.

SIGNATURE:

5/2/96 941-967-0018