

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 20, 2002 8:00 am
Secretary of State

05-20-2002 90032 042 ***150.00

DOCUMENT # 282821

1. Entity Name
RAKES ELECTRIC INC

Principal Place of Business

**C/O A.B. REYNOLDS
 3201 EDGEWATER DRIVE
 ORLANDO FL 32804**

Mailing Address

**C/O A.B. REYNOLDS
 3201 EDGEWATER DRIVE
 ORLANDO FL 32804**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1052533

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**REYNOLDS, A.B.
 3201 EDGEWATER DRIVE
 ORLANDO FL 32804**

7. Name and Address of New Registered Agent

Name

Rennebu, Paul

Street Address (P.O. Box Number is Not Acceptable)

3201 Edgewater Drive

City

Orlando

FL 32804

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.

Paul Rennebu - President/Treasurer/Director

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-29-02

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	1VD	<input type="checkbox"/> Delete
NAME	RENNEBU, BARBARA M	
STREET ADDRESS	460 OLOLU DRIVE	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	RENNEBU, BARBARA M	
STREET ADDRESS	460 OLOLU DRIVE	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	PDTD	<input type="checkbox"/> Delete
NAME	REYNOLDS, ATWOOD B	
STREET ADDRESS	3304 KATHLEEN DRIVE	
CITY-ST-ZIP	ORLANDO FL	
TITLE	2VD	<input type="checkbox"/> Delete
NAME	RENNEBU, PAUL E	
STREET ADDRESS	3303 KATHLEEN DR	
CITY-ST-ZIP	ORLANDO FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	(4) V/D/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Rennebu, Barbara M	
STREET ADDRESS	same 460 Ololy Dr.	
CITY-ST-ZIP	Winter Park, FL 329	
TITLE	(1) P/T/D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Rennebu, Paul	
STREET ADDRESS	Same 3303 Kathleen Dr.	
CITY-ST-ZIP	Orlando, FL	
TITLE	(2) S/V/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Rennebu, Alan	
STREET ADDRESS	same 3304 Kathleen Dr.	
CITY-ST-ZIP	Orlando, FL	
TITLE	(3) V/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Reynolds, Atwood	
STREET ADDRESS	3304 Kathleen Dr.	
CITY-ST-ZIP	Orlando, FL	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Paul E. Rennebu

SIGNATURE:

Paul E. Rennebu

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-02

Date

407-425-5278

Daytime Phone #

CR2E034 (9/01)