

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Suzanne B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 283559 (3)
1. Corporation Name
LENHART ELECTRIC COMPANY



Principal Place of Business: 1134 NORTH BOULEVARD EAST
LEESBURG FL 34748
Mailing Address: 1134 NORTH BOULEVARD EAST
LEESBURG FL 34748

2. Principal Place of Business: 21 State, Apt. #, etc. 22 City & State 23 Zip 24 Country
2a. Mailing Address: 26 State, Apt. #, etc. 27 City & State 28 Zip 29 Country 30

9. Name and Address of Current Registered Agent

LENHART, JAMES C
1134 NORTH BOULEVARD EAST
LEESBURG, FL
34748

3. Date Incorporated or Qualified 07/22/1964
3a. Date of Last Report 01/26/1995
4. FEI Number 59-1055682
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. Does corporation have liability for intangible tax under s. 199.032, Florida Statutes? ☒ Yes ☐ No
10. Name and Address of New Registered Agent

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 607.05(2) and 607.11(3), 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. Thereby, accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.05(2), Florida Statutes.

SIGNATURE

Signature of person filing report: _____

Signature of person authorized to change registered office or agent: _____

Signature of person authorized to change registered office or agent: _____

12. OFFICERS AND DIRECTORS

1. TITLE D
NAME LENHART, VICKIE A
STREET ADDRESS 215 LAKE ELLA RD
CITY-STATE-ZIP FRUITLAND PARK FL
2. TITLE PD
NAME LENHART, JAMES C
STREET ADDRESS 215 LAKE ELLA RD
CITY-STATE-ZIP FRUITLAND PARK FL
3. TITLE VD
NAME LENHART, JAMES KELLY
STREET ADDRESS 209 N. VALLEY ROAD
CITY-STATE-ZIP FRUITLAND PARK FL
4. TITLE ST
NAME LENHART, STEPHANIE
STREET ADDRESS 209 N. VALLEY ROAD
CITY-STATE-ZIP FRUITLAND PARK FL
5. TITLE
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STREET ADDRESS
CITY-STATE-ZIP
6. TITLE
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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14. I do hereby certify that the information supplied in this report is true and correct, and does not qualify for the exemption stated in Section 119.07(4)(b), Florida Statutes. I further certify that the information indicated on this report is reported as supplemental or current report as 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 resident or business organized to file this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if I am a registered or business address.

SIGNATURE: *James C. Lenhart*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/96 (352) 784-3611

CR2E034 (12/95)