

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Jan 26, 2001 8:00 am**
Secretary of State

01-26-2001 90102 038 ***150.00

DOCUMENT # 298057

1. Entity Name

HARBOR ELECTRIC, INC.

Principal Place of Business

**1745 AURORA RD.
MELBOURNE FL 32935**

Mailing Address

**1745 AURORA RD.
MELBOURNE FL 32935**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1104203**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**VON PLINSKY, JAMES A.
1575 FARNSWORTH AVENUE
PALM BAY FL 32905**

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP		TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
CTD	<input type="checkbox"/> Delete	VON PLINSKY, ALFRED W.	2464 WOODTHRUSH LANE MELBOURNE FL 32904		CD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
PD	<input type="checkbox"/> Delete	VON PLINSKY, JAMES A.	1575 FARNSWORTH AVENUE VALKARIA FL 32950			<input type="checkbox"/> Change <input type="checkbox"/> Addition			
VD	<input type="checkbox"/> Delete	ASHMORE, DOUGLAS E	1981 OHIO ST NE PALM BAY FL			<input type="checkbox"/> Change <input type="checkbox"/> Addition			
	<input type="checkbox"/> Delete				SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	PATRICIA E. STAPLETON 1516 ELMHURST CIR. S.E. PALM BAY, FL 32907		
	<input type="checkbox"/> Delete				TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	RONALD L. SINCLAIR 1516 ELMHURST CIR. S.E. PALM BAY, FL 32907		
	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition			

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES A. VON PLINSKY

Date

1-16-01

Daytime Phone #

321-254-7959

CR2E034 (10/00)