

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 16, 2004 8:00 am
Secretary of State

01-16-2004 90011 030 ***150.00

DOCUMENT # 305550

1. Entity Name
SPARTON ELECTRONICS FLORIDA, INC.



Principal Place of Business
**C/O RICHARD LANGLEY
2400 EAST GANSON STREET
JACKSON, MI 49202**

Mailing Address
**C/O RICHARD LANGLEY
2400 EAST GANSON STREET
JACKSON, MI 49202**



01052004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1151346

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HOCKENBROCHT, DAVID W
STREET ADDRESS	2400 E. GANSON ST.
CITY-ST-ZIP	JACKSON, MI 49202
TITLE	VD
NAME	JOHNSON, DOUGLAS E
STREET ADDRESS	2400 E. GANSON ST. 5612 JOHNSON LAKE ROAD
CITY-ST-ZIP	JACKSON, MI DELEON SPRINGS FL 32130
TITLE	TD
NAME	LANGLEY, RICHARD L.
STREET ADDRESS	2400 EAST GANSON STREET
CITY-ST-ZIP	JACKSON, MI 49202
TITLE	AS
NAME	LANGLEY, RICHARD L.
STREET ADDRESS	2400 EAST GANSON STREET
CITY-ST-ZIP	JACKSON, MI 49202
TITLE	S
NAME	LERCZAK, JOSEPH S
STREET ADDRESS	2400 EAST GANSON STREET
CITY-ST-ZIP	JACKSON, MI 49202
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard L. Langley

RICHARD L. LANGLEY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/8/04

517-787-8600

Daytime Phone #