## **FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**PROFIT** CORPORATION ANNUAL REPORT

1997



ELORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 359240

(9)

ELLIOTT ELECTRONICS, INC.

Principal Place of Business Mailing Address 713 17TH ST. 713 17TH ST. VERO BEACH FL 32960-6219 VERO BEACH FL 32960 3. Date incorporated or Qualified 3a. Date of Last Report 02/04/1970 04/23/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1284746 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country Country Zισ 8. This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name SIMMONS, WM. GLEN 713 17TH ST. Street Address (P.O. Box Number is Not Acceptable) 82 VERO BEACH FL 32960 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607.1508. 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signate in grade print 3 new of expidental agent and lide of agent allease. (KOTE Pregistered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Addition 1.1 TITLE Change TiTLE SIMMONS, WM. GLEN 1.2 NAME NAME 713 17TH ST. STREET ADDRESS 1.3 STREET ADDRESS **VERO BEACH FL** City - St - ZiP 1.4 CITY-ST-ZIP DELETE ☐ Change Addition TATLE 21 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST-ZIP CITY - ST - ZIP DELETE Change Addition TELLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CHY-SY-ZIP 3.4 CITY-ST-ZIP DELETE Change Addition TITLE 4.1 THLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Addition TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADURESS 5.4 CITY-ST-ZIP CHY-SI-ZIF DELETE Addition 61 TITLE TITLE 6.2 NAME

6.3 STREET ADDRESS

fling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the Al annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that er or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

64 CITY-ST-ZIP

**SIGNATURE:** 

appears in Block 12 or

information indicated on this annual report or supplement am an officer or director of the corporation of the recor-

STREET ADDRESS

Ko75624001

**FILED** 

Jan 16 1997 8:00am

Secretary of State

(96/6)