

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 387477

1. Entity Name

CLAY ELECTRIC SERVICES, INC.

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90174 047 ***158.75

Principal Place of Business

Mailing Address

225 WEST WALKER DRIVE
P.O. BOX 308
KEYSTONE HEIGHTS FL 32656

225 WEST WALKER DRIVE
P.O. BOX 308
KEYSTONE HEIGHTS FL 32656-0308

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1613094

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

7. Name and Address of New Registered Agent

PHILLIPS, WILLIAM C.
225 W. WALKER DR
KEYSTONE HEIGHTS FL 32656

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, 2000 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 SD ☐ Delete
NAME HASTINGS, ANGUS
STREET ADDRESS POST OFFICE BOX 8
CITY-ST-ZIP FT. MCCOY FL 32134

TITLE P/D ☒ Change ☐ Addition
NAME
STREET ADDRESS 17188 NE 45th Ave Rd
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME GNANN, FLOYD
STREET ADDRESS 4138 EVERETT AVENUE
CITY-ST-ZIP MIDDLEBURG FL 32068

TITLE V/D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME SMITH, CEDRICK M. JR.
STREET ADDRESS 106 NE 6TH AVENUE
CITY-ST-ZIP WILLISTON FL 32696

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD ☐ Delete
NAME MULLINS, ROBERT S.
STREET ADDRESS 1702 S. WATERS STREET
CITY-ST-ZIP STARKE FL 32091

TITLE D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME MALPHURS, THOMAS L.
STREET ADDRESS 17216 NW 262ND AVENUE
CITY-ST-ZIP ALACHUA FL 32615

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME WINGATE, RAYMOND
STREET ADDRESS POST OFFICE BOX 1324
CITY-ST-ZIP KEYSTONE HEIGHTS FL 32656

TITLE S/D ☒ Change ☐ Addition
NAME
STREET ADDRESS 6505 Immokalee Rd.
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.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 4, 2000

(352) 473-8000

Date

Daytime Phone #

03/14/00

#387477
A0057104

12. OFFICERS AND DIRECTORS		13. OFFICERS AND DIRECTORS CHANGES	
7.1 TITLE		7.1 TITLE	T/D X Change X Addition
7.2 NAME		7.2 NAME	Smith, Kelly R., Jr.
7.3 ADDRESS		7.3 ADDRESS	1526 Hwy 17 North
7.4 CITY-ST-ZIP		7.4 CITY-ST-ZIP	Bostwick, FL 32007
8.1 TITLE		8.1 TITLE	D X Change X Addition
8.2 NAME		8.2 NAME	Reeves, Susan S.
8.3 ADDRESS		8.3 ADDRESS	12828 S US Hwy 301
8.4 CITY-ST-ZIP		8.4 CITY-ST-ZIP	Hawthorne, FL 32640
9.1 TITLE		9.1 TITLE	D X Change X Addition
9.2 NAME		9.2 NAME	Whitehead, John
9.3 ADDRESS		9.3 ADDRESS	RT. 1 Box 478 N/A
9.4 CITY-ST-ZIP		9.4 CITY-ST-ZIP	Lake Butler, FL 32054
10.1 TITLE		10.1 TITLE	CEO X Change X Addition
10.2 NAME		10.2 NAME	Phillips, William C.
10.3 ADDRESS		10.3 ADDRESS	225 W. Walker Dr.
10.4 CITY-ST-ZIP		10.4 CITY-ST-ZIP	Keystone Heights, FL 32656

*Note the N/A in the address is because no street address is available.