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Feb 03 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 409549 (3)  
1. Corporation Name  
A.M. ELECTRIC OF VENICE, INC.



Principal Place of Business Mailing Address  
160 RICH RD. 160 RICH RD  
VENICE FL 34292 VENICE FL 34292  
US US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

3. Date Incorporated or Qualified  
09/27/1972  
4. FEI Number 59-1413539 Applied For  
Not Applicable  
5. Certificate of Status Desired \$8.75 Additional  
Fee Required  
6. Election Campaign Financing \$5.00 May Be  
Trust Fund Contribution Added to Fees  
8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent  
MINGER, M. DAVID  
160 RICH RD  
VENICE FL 34292  
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 607.0502 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
TITLE CEO 1.1 TITLE  
NAME MINGER, ALBERT J. 1.2 NAME  
STREET ADDRESS 112 BAYVIEW DRIVE 1.3 STREET ADDRESS  
CITY-ST-ZIP NOKOMIS FL 1.4 CITY-ST-ZIP  
TITLE SD 2.1 TITLE  
NAME MINGER, MERLE D. 2.2 NAME  
STREET ADDRESS 112 BAYVIEW DRIVE 2.3 STREET ADDRESS  
CITY-ST-ZIP NOKOMIS FL 2.4 CITY-ST-ZIP  
TITLE PD 3.1 TITLE  
NAME MINGER, M. DAVID 3.2 NAME  
STREET ADDRESS 737 PINELAND AVE 3.3 STREET ADDRESS  
CITY-ST-ZIP VENICE FL 3.4 CITY-ST-ZIP  
TITLE D 4.1 TITLE  
NAME MINGER, J. BRADFORD 4.2 NAME  
STREET ADDRESS 160 RICH RD 4.3 STREET ADDRESS  
CITY-ST-ZIP VENICE FL 4.4 CITY-ST-ZIP  
TITLE VD 5.1 TITLE  
NAME MAYES, JOHN A. 5.2 NAME  
STREET ADDRESS 5864 VIOLA ROAD 5.3 STREET ADDRESS  
CITY-ST-ZIP VENICE FL 5.4 CITY-ST-ZIP  
TITLE VP 6.1 TITLE  
NAME SULATY, MARCIA J. 6.2 NAME  
STREET ADDRESS 20 LAUREL RD 6.3 STREET ADDRESS  
CITY-ST-ZIP LAUREL FL 6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE MARCIA J. SULATY  
68 DE 9/11/98/102

CR2E034 (10/97)