FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 24 AM 9:55

DOCUMENT # 459992 (4)

1. Corporation Name
BENNETT ELECTRIC & SONS, INC.

Principal Place of Business	Mailing Address
2913 LITHIA PINECREST ROAD ~~P.O. BOX 1069~~ VALRICO FL 33594 - 1069	~~2913 LITHIA PINECREST ROAD~~ P.O. BOX 1069 VALRICO FL 33594 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 08/21/1974
3a. Date of Last Report: 01/27/1994
4. FEI Number: 59-1554102 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 2913 Lithia Pinecrest Rd	26 P.O. Box 1069
Suite, Apt. #, etc. 22 Valrico, Fla.	Suite, Apt. #, etc. 27 Valrico, Fla.
City & State 23 33594-1069	City & State 28 33594-1069
Zip 24	Country 25 Hillsborough
Zip 29	Country 30 Hillsborough

9. Name and Address of Current Registered Agent

BENNETT, STEVE
PO BOX 1069
VALRICO FL 33594 - 1069

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD ☐ Change ☐ Addition
NAME	BENNETT, STEVE	1.2 NAME	Bennett, Steve
STREET ADDRESS	2913 LITHIA PN CREST RD ~~Crest~~ Pinecrest Rd	1.3 STREET ADDRESS	2913 Lithia Pinecrest Rd
CITY-ST-ZIP	VALRICO FL 33594-1069	1.4 CITY-ST-ZIP	Valrico, Fla 33594-1069
TITLE	SD	2.1 TITLE	SD ☐ Change ☐ Addition
NAME	BENNETT, EVELYN P.	2.2 NAME	Bennett, Evelyn P.
STREET ADDRESS	2913 LITHIA PINECREST RD.	2.3 STREET ADDRESS	2913 Lithia Pinecrest Rd.
CITY-ST-ZIP	VALRICO FL - 33594-1069	2.4 CITY-ST-ZIP	Valrico, Fla 33594-1069
TITLE	VD	3.1 TITLE	☒ Change ☐ Addition
NAME	HOPE GOERGE D. JR. DELETE	3.2 NAME	
STREET ADDRESS	10812 BROWNING RD.	~~3.3 STREET ADDRESS~~	Sorry
CITY-ST-ZIP	LITHIA FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 addition.

SIGNATURE: Steve Bennett Jan 16 95 813-689-2071
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Steve Bennett

0442040 FP