COF ANNL	PROFIT RPORATION JAL REPORT <b>1998</b>	Sandre E Secreta	R MAY 1ST IS \$550.00 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		May 04 1998 8:00a Secretary of State		
MIDST/	MENT # 50245 ATE ELECTRIC OF OCALA,	· · /					
Principal Place of Business 1720 NE 8TH AVE. OCALA FL 34470 US		Mailing Address 1720 NE 6TH AVE. 34470 OCALA FL 32670 US		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified			
·					05/04/1976		
Principal P	lace of Business	2a. Mailing Address			4. FEI Number	┝┈╋╼┿	oplied For
Suite, Apt.	#, etc.	26 Suite, Apt. #, etc.			59-1708079 5. Certificate of Status Desired		ot Applicable Additional
City & State	• • • • • • • • • • • • • • • • • • •	27 City & State					equired
		28		_	6. Election Campaign Financing Trust Fund Contribution	+ + - + -	May Be to Fees
Zip	Country	Zip	Country		8. This corporation owes or has paid the c		-
	25 9. Name and Address of Curren	29 nt Registered Agent	30		Personal Property Tax due June 30. 10. Name and Address of New Registered		No
	SE, CHARLES JR		81	Name			
	) N.E. 8TH AVE. Ala Fl 34470		82	Street Add	ress (P.O. Box Number is Not Acceptable)		
			83			<u> </u>	
				City		85 Zip	Code
I. Pursuant 1	to the provisions of Sections 607.050	2 and 607.1508, Florida Statut	es, the above	-named corp	poration submits this statement for the purpose	of changing if	ls registered
anent La	egistered agent, or both, in the State m familiar with, and accept the oblig	ations of, Section 607.0505, Ft	orida Statutes	the corporat	tion's board of directors. I hereby accept the ap	ppointment as	registered
GNATURE	Signature, twood or printed popularil range tered and	pot and tills if applicable (NO1)	E Perinternet Are	Dt signatura cao é			
GNATURE		D DIRECTORS	E Registered Age	int signature requir	red when reinstating) Date ADDITIONS/CHANGES TO OFFICERS AN		15 IN 12
GNATURE 2. LE	OFFICERS AN		<b>13.</b> 1.1 TITLE	int signature requir	rod when reinsleting) DATE		15 IN 12
GNATURE	OFFICERS AN PD HAMMETT, JERRY R	D DIRECTORS	13.		rod when reinsleting) DATE		15 IN 12
GNATURE LE ME REET ADDRESS IV-ST-ZIP	OFFICERS AN PD Hammett, Jerry R 1024 W Hwy 329 Citra FL		<b>13.</b> 1.1 TITLE 1.2 NAME	ADDRESS	rod when reinsleting) DATE	ND DIRECTOF	RS IN 12
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