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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 503261

(0)

SECURITY ELECTRIC. INC.

Principal Place of Business Mailing Address **4818 FLEETWOOD STREET 4818 FLEETWOOD STREET** NEW PORT RICHEY FL 34653 NEW PORT RICHEY FL 34653-5153 3. Date Incorporated or Qualified 3a. Date of Last Report 05/14/1976 01/26/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 4407 WHITTON YAW GOTTINU COPP 59-1687467 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing New PORT RICHEY, FL New 23 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, ☐ Yes ☐ No 30 Florida Statutes 24 25 29 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name VITACCO, GLORIA Street Address (P.O. Box Number is Not Acceptable) 4818 FLEETWOOD STEET 82 **NEW PORT RICHEY FL 33653** 83 RA 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 Signature, typed or printed name of registered agent and ticc if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIBECTORS IN 12 12. 13. Change Addition PD DELETE THILE 1.1 TITLE NAME VITACCO, FRANK D. 1.2 NAME WHITTON WAY 4818 FLEETWOOD ST. 1.3 STREET ADDRESS STREET ADDRESS New PORT RICHEY, FL 34658-6358 **NEW PORT RICHEY FL** 1.4 CITY-ST-ZIP CITY-\$1-75 DELETE THE 21 TITLE VITACCO, GLORIA M. NAME 22 NAME 4407 WHITTON WAY 4818 FLEETWOOD ST. 23 STREET ADDRESS STREET ADDRESS **NEW PORT RICHEY FL** 2 4 CITY-ST-ZIP CITY - \$1 - ZIP DELETE THE 31 TITLE NAME 32 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. City-St-ZiP CHY-\$1-26 DELETE Change Addition THILE 4.1 TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition THLE 5 1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY - S1 - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME: 6.2 NAME

6.3 STREET ADDRESS 6.4 CHTY - ST-ZIP 14. I do 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

STREET ADDRESS

appears in Block 12 or Block 13 if changed, or on an attachment with an address

FILED

Mar 06 1997 8:00am

Secretary of State