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

APPROVED AND FILED

'95 APR 27 AM 8:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **547849** **(0)**

1. Corporation Name

HAYWOOD ELECTRIC, INC.

Principal Place of Business	Mailing Address
1607 SE 8 AVENUE DEERFIELD FL 33441	1607 SE 8 AVENUE DEERFIELD FL 33441

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/28/1977

3a. Date of Last Report: 03/14/1994

2. Principal Place of Business
21: 3143 CocoPlum Circle
22: Suite, Apt. #, etc.
23: City & State: CocoNut Creek, FL.
24: Zip: 33063
25: Country: USA

2a. Mailing Address
26: 3143 CocoPlum Circle
27: Suite, Apt. #, etc.
28: City & State: CocoNut Creek
29: Zip: 33063
30: Country: USA

4. FEI Number: 59-1770216 ☐ 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

9. Name and Address of Current Registered Agent

HAYWOOD, PAUL M.
1607 SE 8TH AVE.
DEERFIELD BCH. FL 33441

10. Name and Address of New Registered Agent

81 Name: Haywood, Paul. M.
82 Street Address (P.O. Box Number is Not Acceptable)
83: 3143 CocoPlum Circle
84 City: CocoNut Creek FL 85 Zip Code: 33063

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 mandatory)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE		☐ Change ☐ Addition
NAME	HAYWOOD, PAUL	1.2 NAME		
STREET ADDRESS	1607 S.E. 8TH AVENUE	1.3 STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BEACH FL	1.4 CITY-ST-ZIP		
TITLE	ST	2.1 TITLE	ST	☒ Change ☐ Addition
NAME	GIORDANO, ELLEN M	2.2 NAME	LESLIE M. HAYWOOD	
STREET ADDRESS	3143 COCOPLUM CIR	2.3 STREET ADDRESS	1607 S.E. 8TH AVE	
CITY-ST-ZIP	COCONUT CREEK FL	2.4 CITY-ST-ZIP	DEERFIELD BCH, FL. 33441	
TITLE		3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		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)(k), 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: Paul M. Haywood — 2/6/95 — (409) 833-3449
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR Director) (Date) (Daytime Phone #)

0264602 CP