FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **648024** **(8)**

1. Corporate Name

GENERAL ECLECTIC, INC.

Principal Place of Business

121 FORREST ST
P.O. BOX 4103
SEASIDE FL 32459
US

Mailing Address

PO BOX 4772
P.O BOX 4772
SEASIDE FL 32459
US

2. Principal Place of Business
21
Street Address
22
Suite
23
City
24
County
25

2a. Mailing Address
26
Street Address
27
City & State
28
Zip
29
Country
30

3. Date Incorporated or Qualified: **12/12/1979**

3a. Date of Last Report: **04/04/1995**

4. FEI Number: **59-1965062** 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

TROXEL, CHERYL
121 FOREST ST.
SEASIDE FL 32459

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 Section 607.0501, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered agent, or both, in accordance with Section 607.0501, Florida Statutes. The corporation's board of directors hereby accept the appointment as registered agent. Each registered agent accepts the obligations of Section 607.0501, Florida Statutes.

12. OFFICERS AND DIRECTORS

PD
TROXEL, CHERYL
121 FORREST ST
SEASIDE FL
[ ] DELETE

DTS
NABLO, JEFFREY L.
121 FORREST ST
SEASIDE FL
[ ] DELETE

[ ] DELETE

[ ] DELETE

[ ] DELETE

[ ] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[ ] Change [ ] Addition

[ ] Change [ ] Addition

[ ] Change [ ] Addition

[ ] Change [ ] Addition

[ ] Change [ ] Addition

[ ] Change [ ] Addition

14. I hereby certify that the information indicated on this report or supplemental 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 of this report or is added to Block 13 with an addition.

SIGNATURE: (CHERYL TROXEL) 1/23/96 904-231-5421

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)