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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # 648277

(2)

SUNBELT ELECTRICAL COMPANY, INC.

FILED							
Sep 02 1997	8:00am						
Secretary o	f State						

|--|--|

Principal Place of Business 7804 SEARS BOULEVARD PO BOX 17836 PENSACOLA FL 32522-7836 Mailing Address 7804 SEARS BOULEVARD PO BOX 17836 PENSACOLA FL 32522-7836					
		PO BOX 17836		•	
				3. Date Incorporated or Qualified 12/14/1979	3s. Date of Last Report 05/01/1996
⊢ `	Place of Business	2a. Mailing Address		4. FEt Number	Applied For
21	The state of the s		59-1957394	Not Applicable	
22				5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	B. This corporation has liability for in	
24	25		30		Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Reg	istered Agent
	ARP, LINDA G		81 Name		
	04 SEARS BLVD		82 Street Add	dress (P.O. Box Number is Not Acceptable	e)
PEI	NSACOLA FL 32514				
			83		
			84 City		April 7: Code
			04 City		FL 85 Zip Code
		one 607, 1508, Florida Statute Florida: Such change was a ons of, Section 607.0505, Flor Florida Statute	is, the above-hamed colluthorized by the corpora rida Statutes.	rporation submits this statement for the pu alion's board of directors. I hereby accept	rpose of changing its registered the appointment as registered
SIGNATURE	Signature typed or printed name of registered agent i	and tale if applicable (NOTE	Hegistered Agent signature requ	ured when re-instating)	DATE
12.	OFFICERS AND I	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE	TV	☐ DELETE	1.1 1/TLE		Change Addition
NAME	COOK, DOROTHY		1.2 NAME		
STREET ADDRESS	921 MEDFORD AVENUE		1.3 STREET ADDRESS		
CITY-ST-ZIP	PENSACOLA FL		1.4 CITY - ST - ZIP		
TITLE	PO	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME .	SHARP. LINA		2.2 NAME	1.F	_ • •
STREET ADDRESS	11536 THOUSAND OAKS DRIVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	PENSACOLA FL		2. 4 CITY-ST-ZIP		•
TITLE	ST	DELETE	3.1 TITLE		Change Addition
NAME	PULSE, VICKI L	-	3.2 NAME		
STREET ADDRESS	AARAA TIIALIAANA AANA BBILD		3.3 STREET ADDRESS		
CITY-ST-ZIP	PENSACOLA FL		3.4. CITY- ST - ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME		_ 	4 2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		,
TITLE		DELETE	5.1 TITLE		Change Addition
NAME	1	—	5.2 NAME		- semilo semilor
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 City-St-Zip		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		E onwing Et voorgon
STREET ADDRESS					
			6.3 STREET ADDRESS		
CITY-ST-ZIP		20 11 10 4 1	6.4 CITY - ST - ZIP	11.0	

gldoes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. I further certify that the fundal report is true and accurate and that my signature shall have the same legal effect as if made under oath; that if further empowered to execute this report as required by Chapter 607. Florida Statules; and that my name ment with an address