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 # 660232

(0)

CAPITAL CITY ELECTRONICS INC.

FILED Apr 21 1997 8:00am Secretary of State



Principal P-ace of Business Mailing Address 2088 N. MONROE ST. P.O. BOX 1655 TALLAHASSEE FL 32303 TALLAHASSEE FL 32302-1655			1 IRBNIC GOLDO BERN BONE NORD ALINO NON DERNE RERI ROBLE BODE DERNE BERN CORT		
US				3. Date Incorporated or Qualified 03/24/1980	3s. Date of Last Report 05/01/1996
2. Poncipal Place o		2a. Mailing Address		4. FEI Number	Applied For
1 2000 N.	, Mouroe Street	26 P.O. Bux 1655		59-2014046	Not Applicable
Suite, Apt #, etc 2		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City 8 State 3 Tallaha	ssee, FL.	City & State 28 Tallahasse	e, FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25 USA	Zip - 2 2 2 A 7	Country	8. This corporation has liability for	
4 \$2505		29 32302	30 U.SA		Yes No
	Name and Address of Curren	IL Hegistered Agent	O1 Nom	10. Name and Address of New Re	gistered Agent
				,	
				t Address (P.O. Box Number is Not Acceptal	ble)
TALLAHA	ISSEE FL 32312				THE
			83		
			84 City		85 Zip Code
				d corporation submits this statement for the	FL S Zip Gode
12.	bert Backensto e tyreter pooled name of registored ago OFFICERS AN	D DIRECTORS	13.	re required when reinstalling) ADDITIONS/CHANGES TO OFFIC	
THE PS	• •	L DELETE	1.1 TITLE		Change Addition
	CKENSTOSS, GILBERT JR		12 NAME		
	15 TRESCOTT DR		1.3 STREET ADDRESS		
CHY-ST-7/P IA	LLAHASSEE FL 32312	☐ DELETE	1.4 City-St-ZiP 2.1 Title		Change Addition
			2.2 NAME		El orange El Month
VAME			2.3 STREET ADDRESS	1	
STREET ADDRESS DITY-ST-ZIP			2 4 CITY-ST-ZIP	*	
III.LE		DELETE	3.1 TITLE		Change Addition
IAM:		<u> </u>	3.2 NAME		
STREEL ADORESS			3.3 STREET ADDRESS		
CHY - S1 - ZIP			3.4. CITY-ST-ZIP		
THE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4 2 NAME	<u> </u>	
STREET ADDRESS			4.3 STREET ADDRESS	: [
CHY ST Zur			4.4 City-St-ZiP		
TI/LE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME	1	
STREET ADORESS			5.3 STREET ADDRESS	; 	
01Fr - \$1 - ZIP			5 4 City-ST-ZIP		
INLE		☐ DELETE	6.1 TITLE		Change Addition
NAME .			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS	; [
CFFY - S1 - ZIP			6.4 CITY-ST-ZIP		

14. 14. be the property 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CIGNATURE

Gilbert Backenitoss, dr.

LECTOR DUL

Y/11/97 904-531-0071

B PHOHO W