

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # 670424 (1)

1. Corporation Name

DEBERRY ELECTRIC CO., INC.

Principal Place of Business

**13463 MAIN ST
26037
JACKSONVILLE FL 32218**

Mailing Address

**13463 MAIN ST
26037
JACKSONVILLE FL 32218**

**APPROVED
AND
FILED**

95 APR 21 PM 3:55

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/16/1980

3a. Date of Last Report

04/01/1994

4. FEI Number

59-2012281

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

2. Principal Place of Business

**21 13463 N. MAIN ST.
Suite, Apt. #, etc.**

2a. Mailing Address

**26 P.O. BOX 26037
Suite, Apt. #, etc.**

22 P.O. BOX 26037

City & State

23 JACKSONVILLE, FLORIDA

Zip

24 32218

Country

City & State

28 JACKSONVILLE, FLORIDA

Zip

29 32226-6037

Country

30

9. Name and Address of Current Registered Agent

**BEARDSLEY, DALE A.
4015 SOUTHPONT BLVD. #260
JACKSONVILLE FL 32218**

10. Name and Address of New Registered Agent

81 Name

PETER A. ROBERTSON

82 Street Address (P.O. Box Number is Not Acceptable)

500 EAST UNIVERSITY AVENUE, SUITE A

83

84 City

GAINESVILLE,

FL

85 Zip Code

32602

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, hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Peter A. Robertson

(NOTE: Registered Agent Signature Required when Consulting)

DATE

4-18-95

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VTC

**DEBERRY, DAVID A., JR.
2657 NEW BERLIN ROAD
JACKSONVILLE FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VS

**DEBERRY, GERALDINE F.
2657 NEW BERLIN ROAD
JACKSONVILLE FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

P

**DEBERRY, DAVID ALAN
11474 V C JOHNSON RD.
JACKSONVILLE FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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 110.07(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David Alan DeBerry DAVID ALAN DEBERRY

Date

Signature Number

4-14-95 904-757-8424