

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 # 672378 (7)

1. Corporation Name
BEST ELECTRIC SERVICE, INC.



Principal Place of Business

24241 TAMiami TrL. S
STE 2
BONITA SPGS FL 33923
US

Mailing Address

24241 TAMiami TrL. S
STE 2
BONITA SPGS FL 33923
US

3. Date Incorporated or Qualified
06/04/1980

3a. Date of Last Report
03/28/1995

2. Principal Place of Business

21 24181 Tamiami Trail

Suite, Apt. #, etc.

22 Suite 2

City & State

23 Bonita Springs, FL

Zip

24 33923

Country

25 Lee

2a. Mailing Address

26 24181 Tamiami Trail

Suite, Apt. #, etc.

27 Suite 2

City & State

28 Bonita Springs, FL

Zip

29 33923

Country

30 L33

4. FEI Number

59-2005756

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

☐ \$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

HODGES, PERRY J.
24241 TAMiami TrL. S
STE 2
BONITA SPRINGS FL 33923

10. Name and Address of New Registered Agent

81 Name

Perry J. Hodges

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

24181 Tamiami Trail

83

Suite 2

84 City

Bonita Springs

FL

85 Zip Code

33923

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 Perry J. Hodges

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1/18/96

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP
PTD	HODGES, PERRY J	24241 TAMiami TrL., S., STE 2	BONITA SPRINGS FL	☐ DELETE			
VPSD	HODGES, MARILYN R	24241 TAMiami TrL., S., STE 2	BONITA SPRINGS FL	☐ DELETE			
AS	SITZLAR, JEFFREY D	24241 TAMiami TrL., S., STE 2	BONITA SPRINGS FL	☐ DELETE			
AS	DOBSCHA, PASQUAL J	24241 TAMiami TrL., S., STE 2	BONITA SPRINGS FL	☒ DELETE			
AS	SITZLER, JERRY W	24241 TAMiami TrL., S., STE. 2	BONITA SPRINGS FL	☐ DELETE			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	5. TITLE	6. NAME	7. STREET ADDRESS	8. CITY - ST - ZIP
PTD	Hodges, Perry J.	24181 Tamiami Trail S. Suite 2	Bonita Springs, FL 33923	☒ Change ☐ Addition			
VPSD	Hodges, Marilyn R.	24181 Tamiami Trail S. Suite 2	Bonita Springs, FL 33923	☒ Change ☐ Addition			
AS	Sitzlar, Jeffrey D.	24181 Tamiami Trail S. Suite 2	Bonita Springs, FL 33923	☒ Change ☐ Addition			
				☐ Change ☐ Addition			
AS	Sitzlar, Jerry W.	24181 Tamiami Trail S. Suite 2	Bonita Springs, FL 33923	☒ Change ☐ Addition			
				☐ 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 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: Marilyn R. Hodges, Vice-President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/96

(941) 992-3561

Date

Daytime Phone #

CR2E034 (12/95)