

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2002 8:00 am
Secretary of State

03-24-2002 90009 009 ***150.00

DOCUMENT # 672378

1. Entity Name
BEST ELECTRIC, INC.

Principal Place of Business

**24181 TAMiami TRAIL
STE 2
BONITA SPGS FL 34134
US**

Mailing Address

**24181 TAMiami TRAIL
STE 2
BONITA SPGS FL 34134
US**



2. Principal Place of Business

10911 Harmony Park Drive

3. Mailing Address

Same

Suite, Apt. #, etc.

#2

Suite, Apt. #, etc.

City & State

Bonita Springs, FL

City & State

Same

Zip

34135

Country

USA

Zip

34135

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-2005756**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HODGES, PERRY J.
24181 TAMiami TRAIL
STE 2
BONITA SPRINGS FL 33923**

7. Name and Address of New Registered Agent

Name

Perry J. Hodges

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

10911 Harmony Park Drive #1

City

Bonita Springs

FL

Zip Code

34135

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Perry J. Hodges
Signature, typed or printed name of registered agent and the if applicable.

Perry J. Hodges

1/8/02

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PTD** ☐ Delete
NAME **HODGES, PERRY J**
STREET ADDRESS **24181 TAMiami TRAIL STE 2**
CITY-ST-ZIP **BONITA SPRINGS FL**

TITLE **VPSD** ☐ Delete
NAME **HODGES, MARILYN R**
STREET ADDRESS **24181 TAMiami TRAIL STE 2**
CITY-ST-ZIP **BONITA SPRINGS FL**

TITLE **AS** ☒ Delete
NAME **DOBSCHA, PASQUAL J**
STREET ADDRESS **24181 TAMiami TRAIL S #2**
CITY-ST-ZIP **BONITA SPRINGS FL 34134**

TITLE **AS** ☐ Delete
NAME **HODGES, CHADD P**
STREET ADDRESS **24181 TAMiami TRAIL S #2**
CITY-ST-ZIP **BONITA SPRINGS FL 34134**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PTD** ☒ Change ☐ Addition
NAME **Hodges, Perry J.**
STREET ADDRESS **10911 Harmony Park Drive #2**
CITY-ST-ZIP **Bonita Springs, FL 34135**

TITLE **VPSD** ☒ Change ☐ Addition
NAME **Hodges, Marilyn R**
STREET ADDRESS **10911 Harmony Park Drive #2**
CITY-ST-ZIP **Bonita Springs, FL 34135**

TITLE **AS** ☐ Change ☒ Addition
NAME **Hodges, Keegan p.**
STREET ADDRESS **10911 Harmony Park Drive #2**
CITY-ST-ZIP **Bonita Springs, FL 34135**

TITLE **AS** ☒ Change ☐ Addition
NAME **Hodges, Chadd P**
STREET ADDRESS **10911 Harmony Park Drive #2**
CITY-ST-ZIP **Bonita Springs, FL 34135**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Perry J. Hodges
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Perry J. Hodges

1/8/02

941 992 1856

Date

Daytime Phone #

CR2E034 (9/01)