

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 # 684651 (3)
1. Corporation Name
ELECTRONICS SYSTEMS CORPORATION OF TAMPA



Principal Place of Business
5310 W. CRENSHAW ST.
TAMPA FL 33634
US

Mailing Address
5310 W. CRENSHAW ST.
TAMPA FL 33634
US

3. Date Incorporated or Qualified 08/19/1980
3a. Date of Last Report 02/20/1995
4. FEI Number 59-2010969
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 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country
2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country
30

9. Name and Address of Current Registered Agent

NAIL, JOHN C.
8708 ALBION CT.
TAMPA, 33634

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City Tampa FL 85 Zip Code 33626

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

Signature, typed or printed name of registered agent and date of appointment

Signature, typed or printed name of registered agent and date of appointment

DATE

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
1. P NAIL, JOHN C. 8708 ALBION CT. TAMPA FL
2. VST NAIL, ANGELA 8708 ALBION CT TAMPA FL
3. DELETED
4. DELETED
5. DELETED
6. DELETED

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. 1. TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP
8912 Breeland Dr. TAMPA, FL 33626
2. 1. TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP
8912 Breeland Dr. TAMPA, FL 33626
3. 1. TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP
4. 1. TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP
5. 1. TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP
6. 1. TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mary Angela Nail 4/30/96 813/885-2000

CR2E034 (12/95)