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Jan 29, 1999 8:00am

Secretary of State

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

					01-29-1999 900	01-29-1999 90014 023 ***150.00			
DOCU	IMENT # 693834				01-29-1777 70	714 023 1	130.00		
GIBSON ELECTRIC, INC.									
,									
Principal Place of Business Mailing Address				***************************************					
1	AST 20TH STREET	121 NORTH EAST 20TH STREET				•			
OCALA FL 34470		OCALA FL 34470 US			DO NOT	DO NOT WRITE IN THIS SPACE			
00					3. Date Incorporated or Qual		IS SPACE		
					07/08/1981	·.			
2. Principal Place of Business		2a. Mailing Address			4. FEI Number		⊢ -+`	oplied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-2120578			ot Applicable Additional		
22		27		5. Certificate of Status Desire	d 🔲		equired		
City & State		City & State		6. Election Campaign Finance	ing []	•	May Be		
Zip Country		Zip Country		Trust Fund Contribution			to Fees		
24			30		This corporation owes the Personal Property Tax.	current year I	intangible ☐ Yes	□No	
9. Name and Address of Current Registered Agent					10. Name and Address of No	w Registere	d Agent		
GIBSON, DENNIS				81 Name					
121 NORTH EAST 20TH STREET				82 Street A	Address (P.O. Box Number is Not Acc	eptable)			
OC/		83		The state of the s	ne se questo est privies su	i e ka sori sian I e al asti gra	MATERIAL INC.		
1	•		i	04 0"	《海路》的				
with the property and the property of the prop				84 City		F'	L 85 Zip	Code	
11. Pursuant	t to the provisions of Sections 607.050 registered agent, or both, in the State	2 and 607.1508, Florida Statute of Florida, Such change was au	s, the al	bove-named of	corporation submits this statement for	the purpose o	of changing its	registered	
S agent. La	am familiar with, and accept the obliga	tions of, Section 607.0505, Flori	ida Statı	utes.				9.0.0.	
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: I	Registered	Agent signature re-	quired when reinstating) 11 135	DATE			
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO	OFFICERS /			
TITLE	CP GIBSON, DENNIS	☐ DELETE	1.1 TIT	1	[TYD18][ST8		☐ Change	Addition	
NAME STREET ADDRESS	444 NODTH FACT 44TH AT		1.2 NA	REET ADDRESS	•				
CITY-ST-ZIP	OCALA, FL 00000			TY-ST-ZIP					
TITLE	VP ;	☐ DELETE		TLE .	-		☐ Change	☐ Addition	
NAME	GIBSON, SHARON		2.2 NA	WE	,	-			
STREET ADDRESS				REET ADDRESS					
CITY-ST-ZIP	OCALA, FL 00000	DELETE	2. 4 Ci	TY-ST-ZIP			Change	Addition	
NAME SECTION	GIBSON, DENNIS	· — · · · · ,	3,2 NA	• •			□ - /g-		
STREET ADDRESS	ET ADDRESS 121 NORTHEAST 20TH ST		3.3 ST	REET ADDRESS	更大的情况。 1987年	19일도 대 본터, 한참	3.85至5期875万倍的	Ston Brances	
CITY-ST-ZIP	OCALA, FL 00000			TY-ST-ZIP					
TITLE		☐ DELETE	4.1 TIT		Te 54 (414.83 (01))	BETTER STORES	-≀ ≴∞ [_] Change '	and [1] Addition	
NAME STREET ADDRESS			4.2 N/ 4.3 ST	REET ADDRESS		•			
CITY-ST-ZIP	** · ·			TY-ST-ZIP			<u>.</u>		
TITLE .		☐ DELETE	5.1 TIT	,	.,,		☐ Change	☐ Addition	
NAME			5.2 NA	ME REET ADDRESS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
STREET ADDRESS	€P .	•		REET ADDRESS TY-ST-ZIP	State Comme	•			
CITY-ST-ZIP TITLE	2865 44 (80) 4 (8)	☐ DELETE	6.1 TIT				☐ Change	· Addition	
}	★ 295 おど William かたい コー・コービート						•	_	

14. 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 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 attention with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DENNITS COTES ON REREQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR