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

PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 816485

(7)

FLOYD S. PIKE ELECTRICAL CONTRACTOR, INC.

Principal Place of Business Mailing Address

351 Riverside Drive P. O. BOX 868 P. O. BOX 868

MOUNT AIRY NC 27030 MOUNT AIRY NC 27030

MOUNT AIRY NC 27030

MOUNT AIRY NC 27030

MOUNT AIRY NC 27030

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 11/06/1962 2. Principal Place of Business 26. Mailing Address 4. FEI Number Applied For 56-0587238 100 Pike Way P.O. Box 868 Suite, Apt. #, etc. Not Applicable Sulte, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Mount Airy, Mount Airy, NC Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 27030 Personal Property Tax due June 30. 24 27030 25 |29| 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 Zip Code 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, type a or printed name of recistored reprint and the Capphoable (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition TITLE Change 11 100 PIKE, JOE B. NAME 1.2 NAME MONTCLAIR DR STREET ADDRESS 1.3 STREET ADDRESS MOUNT AIRY NO CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TUILE RATLIFF, ROBERT B NAME 2.2 NAMI STREET ADDRESS **\$65 MONTCLAIR DR.** 2.3 STREET ADDRESS MOUNT AIRY NO CITY-ST-ZIP 2. 4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition BANNER, REGINALD L. NAME 3.2 NAME **GRANDVIEW DRIVE** STREET ADDRESS 3.3 STREET ADDRESS MOUNT AIRY NO CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE Change Addition TITLE 4.1 TITLE FORREST JR. EMMETT NAME 4. 2 NAME STREET ADDRESS 453 APOLLO DR 4.3 STREET ADDRESS MOUNT AIRY NO CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5 1 1IILF MERRITT, A. HAYWOOD NAME **5.2 NAME** 836 COUNTRY CLUB ROAD STREET ADDRESS 5 3 STRFET ADDRESS MOUNT AIRY NO CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE Change Addition 61 TITLE BLACKMON, ZACK W. NAME 6.2 NAME 1158 S. FRANKLIN ROAD STREET AODRESS 6.3 STREET ADDRESS MOUNT AIRY NO CITY-ST-ZIP

14. Thereby 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 attachment with an address.

SIGNATURE:

Inother H. Mulling

Jonathan H. Mullins ک

5-1-98

(336) 789-2171

**FILED** 

May 11 1998 8:00am

Secretary of State