

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 819733 (7)

1. Corporation Name

DAVIS ELECTRICAL CONSTRUCTORS, INC

38924



Principal Place of Business

Mailing Address

429 N. MAIN ST.
P O BOX 1907
GREENVILLE SOUTH CAROLINA 29602

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P O BOX 1907
GREENVILLE SOUTH CAROLINA 29602

3. Date Incorporated or Qualified 07/20/1966	3a. Date of Last Report 04/25/1995
4. FEI Number 57-0474303	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	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

Signature, typed or printed name of registered agent and the applicant

NOTE: Registered Agent signature required when changing

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT	1.1 TITLE	☐ Change ☐ Addition
NAME	STEPHENS, J. M.	1.2 NAME	
STREET ADDRESS	124 SEVEN OAKS DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	GREENVILLE SC	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	☐ Change ☐ Addition
NAME	SUMEREL, W MB	2.2 NAME	
STREET ADDRESS	129 BRIDGETON DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	GREENVILLE SC	2.4 CITY-ST-ZIP	
TITLE	AT	3.1 TITLE	☐ Change ☐ Addition
NAME	POSS, R. C.	3.2 NAME	
STREET ADDRESS	1 HUDSON GROVE RD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	GREENVILLE SC	3.4 CITY-ST-ZIP	
TITLE	VS	4.1 TITLE	☐ Change ☐ Addition
NAME	HUGHES, J LOWELL	4.2 NAME	
STREET ADDRESS	305 SILVER CREEK RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	GREER SC	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 supplement 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-96

864-250-2480

CR2E034 (12/95)