PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

1999 DOGUMENT # 840879

Mar 09, 1999 8:00 am Secretary of State 03-09-1999 90074 036 ***150.00

1. Corporation Name						
FOURAKER ELECTRONICS, INC.						
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Principal Place	e of Business	Mailing A	vddress			I 1984 ti retti didu sessi ipita ippis dati prest arett avan avan avan avan
204 E GORDON		204 E GO	RDON STREET			
VALDOSTA GA 31601 VALDOSTA GA 31601						THE SPACE
						DO NOT WRITE IN THIS SPACE
						3. Date incorporated or Qualifed
						06/19/1978 4. FEI Number Applied For
Principal Place of Business 2a. Mailing Address			ng Address			
21 26					58-1263461 Not Applicable \$8.75 Additional	
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired Fee Required	
22 27 City & State City & State						
City & Stat	e	_	& State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
23				Carret		
Zip	Country	Zip		Countr	у _{те} тт	8. This corporation owes the current year intangible Personal Property Tax.
24	25	29		30 = -		10. Name and Address of New Registered Agent
	9. Name and Address of Curren	Registered	Agent	8	I Name	1At taning mine Librations at their traditions of 18
FOLI	RAKER, ICHABOD			Ľ		
572-A APPLEYARD DRIVE				В	Street Ac	Idress (P.O. Box Number is Not Acceptable)
TALLAHASSEE FL 32304				8		
IALLANASSEE PL 32304			"	1		
				8	4 City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.150	8, Florida Statute	s, the abo	ve-named co	proporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered.
office or	egistered agent, or both, in the State	of Florida, Suc	ch change was au	thorized b	y the corpora	ation's board of directors. I hereby accept the appointment as registered
			,		•	3-29-99
SIGNATURE	Signature, typed or printed rame of registered agent	and the ri applica	ble. (NOTE:	Registered Ag	ent signature requ	
12.	OFFICERS AN	D DIRECTOR	s	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P		DELETE	1.1 TITLE	1	☐ Change ☐ Addition
NAME	FOURAKER, FOREST		12 NAME	.		
STREET ADDRESS	ORESS 204 E GORDON ST		1.3 STRE	ET ADDRESS		
CITY-ST-ZIP	VALDOSTA GA 31601			1.4 CITY-	ST-ZIP	
TITLE	T		DELETE	2.1 TOLE		☐ Change ☐ Addition
NAME	FOURAKER, HAYWOOD LEE			2.2 NAM	:	••
STREET ADDRESS	117 COLLEGE ST			2.3 STRE	ET ADORESS	
CITY-ST-ZIP			2.4 CITY	ST-ZEP		
TITLE			3.1 TITLE		☐ Change ☐ Addition	
NAME	FOURAKER, ICHABOD III			3.2 NAM	.	,
STREET ADDRESS	572-A APPLEYARD DRIVE			3.3 STRE	ET ADDRESS	•
	TALLAHASSEE FL 32304			34. CITY	i i	
CITY-ST-ZIP	INLIN MODEL I E GEGGY		DELETE	4.1 TITLE		Change Addition
PANE				4, 2 NAM		
	1				ET ADDRESS	
STREET ADDRESS	1			1		
CITY-ST-ZIP TITLE			☐ DELETE	4.4 CITY-		☐ Change ☐ Addition
				5.2 NAME		
NAME	İ				ET ADDRESS	
STREET ADDRESS	l			5.3 3 IAL		
	ļ			61000	CT_7DD	
CITY-ST-ZIP			CI DELETE	5.4 CITY		☐ Change ☐ Addition
ππ⊾E		·	☐ DELETE	6.1 TITLE		Change Addition
			DELETE	6.1 TITLE 6.2 NAME		Change Addition
TITLE			□ DELETE	6.1 TITLE 6.2 NAME	ET ADDRESS	Change Addition

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 a 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, with all other like ampowered.

SIGNATURE: