

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 # F05240 (9)

1. Corporation Name

NUTTING ELECTRIC COMPANY, INC.



Principal Place of Business

Mailing Address

127 E. NEW YORK AVENUE
C/O MICHAEL S. TEAL
DELAND FL 32724

127 E. NEW YORK AVENUE
C/O MICHAEL S. TEAL
DELAND FL 32724

3. Date Incorporated or Qualified
11/12/1980

3a. Date of Last Report
04/24/1995

2. Principal Place of Business
21 1230 1st AVE.
Suite, Apt. #, etc.

2a. Mailing Address
26 P.O. Box 3296
Suite, Apt. #, etc.

4. FEI Number
59-2048335

Applied For
Not Applicable

22 City & State
23 DELAND, FLORIDA
24 32724
25 VOLUSIA

27 City & State
28 DELAND, FLORIDA
29 32723-3296
30 VOLUSIA

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TEAL, MICHAEL S.
127 E. NEW YORK AVENUE
DELAND FL

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

14. 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 if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME NUTTING, JOHN STANLEY
STREET ADDRESS 428 NO KENTUCKY AVE
CITY-ST-ZIP DELAND FL
☐ DELETE
TITLE STD
NAME NUTTING, FANNIE MAE
STREET ADDRESS 130 NO CLARA AVE
CITY-ST-ZIP DELAND FL
☐ DELETE
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

1.1 TITLE
1.2 NAME JOHN DAVID NUTTING
1.3 STREET ADDRESS 440 NORTH STREET
1.4 CITY-ST-ZIP DELEON SPRINGS, FLORIDA 32130
☐ Change ☒ Addition
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
☐ Change ☐ Addition
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
☐ Change ☐ Addition
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ Addition
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

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 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: John Stanley Nutting JOHN STANLEY NUTTING 2/17/96 1-904-734-0725
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)