

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

FILED
May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # F82715 (6)

1. Corporation Name
PIT BULL ELECTRIC, INC.

Principal Place of Business % JAMES R DRESSLER 110 DIXIE LANE COCOA BEACH FL 32931	Mailing Address % JAMES R DRESSLER 110 DIXIE LANE COCOA BEACH FL 32931-3542
--	---

2. Principal Place of Business 21 Pit Bull Electric Inc.	2a. Mailing Address 26 Pit Bull Electric Inc.
Suite, Apt. #, etc. 22 4195 Harrell Rd.	Suite, Apt. #, etc. 27 4195 Harrell Rd.
City & State 23 Rockledge, FL	City & State 28 Rockledge, FL
Zip 24 32955	Zip 29 32955
Country 25	Country 30

3. Date Incorporated or Qualified 05/25/1982	3a. Date of Last Report 06/10/1996
4. FEI Number 59-2205395	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**DRESSLER, JAMES R
110 DIXIE LANE
COCOA BEACH FL 32931**

10. Name and Address of New Registered Agent

81 Name Cynthia K. Wines
82 Street Address (P.O. Box Number is Not Acceptable) 4185 Harrell Rd.
83
84 City Rockledge
85 Zip Code FL 32955

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 **Cynthia K. Wines** *Cynthia K Wines* **4-22-97**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE VP	<input checked="" type="checkbox"/> DELETE
NAME DRESSLER, RONALD A.	
STREET ADDRESS 2431 CLEARLAKE ROAD	
CITY-ST-ZIP COCOA FL	
TITLE P	<input type="checkbox"/> DELETE
NAME HARRELL, LINDA K	
STREET ADDRESS 4195 HARRELL RD	
CITY-ST-ZIP ROCKLEDGE, FL 00000	
TITLE ST	<input checked="" type="checkbox"/> DELETE
NAME WINES, CYNTHIA K	
STREET ADDRESS 4185 HARRELL RD	
CITY-ST-ZIP ROCKLEDGE, FL 00000	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME Robert L. Harrell	
13 STREET ADDRESS 4195 Harrell	
14 CITY-ST-ZIP Rockledge, FL 32955	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. I do 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 attachment with an address.

SIGNATURE: *Robert L. Harrell* **4-22-97** **402-636-9223**

CR2E034 (9/96)