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FILED
Apr 16 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F96000000396 (9)

1. Corporation Name

COUNTY ELECTRIC SUPPLY CO LTD.

Principal Place of Business

Mailing Address

3316 S MILITARY TRAIL
LAKE WORTH FL 33463

3316 S MILITARY TRAIL
LAKE WORTH FL 33463

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/24/1996

4. FEI Number

59-3349114

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 owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 660 N.W. PEACOCK DRIVE

26 660 N.W. PEACOCK DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 PORT ST. LUCIE FL.

28 PORT ST. LUCIE FL.

24 Zip

Country

29 Zip

Country

34986

34986

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DEMPSEY, W. GLENN
505 SOUTH FLAGLER DR., STE 1330
WEST PALM BEACH FL 33401

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME PCO
STREET ADDRESS BENNETT, COLIN S
CITY-ST-ZIP LITTLEHALES PLACE
UNITED KINGDOM

TITLE ☒ DELETE

NAME V
STREET ADDRESS SWANSON, RUSSELL
CITY-ST-ZIP 3316 S. MILITARY TRAIL
LAKE WORTH FL

TITLE ☒ DELETE

NAME S
STREET ADDRESS JACOBS, MARK
CITY-ST-ZIP 45 CISSOURY RING NORTH
LONDON ENGLAND

TITLE ☐ DELETE

NAME T
STREET ADDRESS HENDERSON, JAMES
CITY-ST-ZIP 1030 N. HWY 10 A
MIAMI FL

TITLE ☐ DELETE

NAME D
STREET ADDRESS ALDEN, JOHN
CITY-ST-ZIP WINSTON HOUSE OLD WARWICK RD.
LAPWORTH UNITED KINGDOM

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☐ 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 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:

4/3/98

407-541-6006

CR2E034 (10/97)