

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 # **G06512** (9)

1. Corporation Name

LLOYD'S ELECTRIC OF TAMPA BAY, INC.



Principal Place of Business

Mailing Address

1109 14TH AVE NW 3081 Pine St
TAMPA FL 33604
US
Clearwater Fl
34623

2205 N KINGS COVE PT
CRYSTAL RIVER FL 34429
US

3. Date Incorporated or Qualified
10/29/1982

3a. Date of Last Report
04/20/1995

2. Principal Place of Business
21 3081 Pine St
Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Clearwater
City & State

27 City & State

23 FL
Zip

28 Zip

24 34623
Country

29 Country

30

4. FEI Number
59-2231366

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GILLEY, LLOYD A.
2205 N KINGS COVE PT
CRYSTAL RIVER FL 34429

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 for public. (Name of registered agent and the applicable)

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

NAME
GILLEY, LLOYD A.
STREET ADDRESS
2205 N KINGS COVE PT
CITY-STATE-ZIP
CRYSTAL RIVER FL

1.2 NAME
1.3 STREET ADDRESS

TITLE ☐ DELETE

1.4 CITY-STATE-ZIP ☐ Change ☐ Addition

NAME
GILLEY, JAMES
STREET ADDRESS
3081 PINE ST
CITY-STATE-ZIP
CLEARWATER FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS

TITLE ☐ DELETE

2.4 CITY-STATE-ZIP ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS

TITLE ☐ DELETE

3.4 CITY-STATE-ZIP ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS

TITLE ☐ DELETE

4.4 CITY-STATE-ZIP ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS

TITLE ☐ DELETE

5.4 CITY-STATE-ZIP ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS

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: **Lloyd A Gilley**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-16-96 **813-551-1100**
Date Daytime Phone #

CR2E034 (12/95)