

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G17474

WESLEY CONSTRUCTION AND ELECTRIC, INC.

Mailing Address Principal Place of Business 1811 OAK DR. NO. 1811 OAK DR. NO. ROCKLEDGE FL 32955 ROCKLEDGE FL 32955 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed 01/05/1983 4, FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 59-2271430 26 Not Applicable 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired -- Fee.Recuired --27 22 \$5.00 May Be City & State City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country This corporation owes the current year Intangible Ζlp Zip. ☐ Yes Personal Property Tax. 25 29 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SMITH, DANIEL W 82 Street Address (P.O. Box Number is Not Acceptable) 1811 OAK DRIVE NORTH **ROCKLEDGE FL 32955** 83 84 85 Zip Code City 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. It am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registe ered agent and title it applicat CR2E034 (11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. ☐ Change Addition DELETE 1.1 TITLE TITLE SMITH, DANIEL W 1.2 NAME NAME 1811 OAK DRIVE NORTH 1.3 STREET ADDRESS STREET ADDRESS ROCKLEDGE FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition **□** DELETE 21 TIDE TITLE SMITH, NAOMI F 22 NAME NAME 1811 OAK DRIVE NORTH 2.3 STREET ADDRESS STREET ADDRES ROCKLEDGE FL 2.4 CITY-ST-20P CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 32 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition An mile 1 DELETE TITLE 4. 2 NAME _

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, with all other like empowered.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

44 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

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PRES. HU-99

407-636-6887

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FILED

Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90079 017 ***150.00