Apr 28, 1999 8:00 am Secretary of State

04-28-1999 90055 036 ***158.75

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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G36545

1. Corporation Name

Principal P ace of Business

THOMPSON ELECTRICAL, INC.

4365 OKKECHO Suite 8-D W. Palm Beac		4365 OKKECHOBEE BLV(). Suite B-D W. Palm Beach Fl 334()9		DO NOT WRITE IN THe 3. Date Incorporated or Qualifed 05/02/1983	IS SPACE	
Principal Place of Business 2a, Mailing Address		2a. Mailing Address		4. FEI Number	⊢	plied For
21		26		<u>59-2300573</u>		t Applicable
Suite, Apt.	#, etc. +e B-10	Suite, Apt. #, etc.	10	5. Certifcate of Status Desired	\$8.75 A	
- City & State	8	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	
Zip Zip	Country 25	Zip Cou 29 30	ntry	This corporation owes the current year Persor al Property Tax.	ntangible Yes	□No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Register	d Agent	
			81 Name			
THOMPSON, SANDRA B 6:10 SEVEN SPRINGS BLVD. LAKE WORTH FL 33463			82 Street	At dress (P.O. Box Number is Not Acceptable)		
5 44			50			
			84 City		85 Zip (Ode
office crn agent. ⊢a	egistered agent, or both, in the State o	and 607.1508, Florida Statutes, the al If Florida. Such change was authorized ions of, Section 607.0505, Florida Statu	by the corp	corporation submits this statement for the purpose oration's board of directors. I hereby accept the ap	of changing its cointment as re	registered g stered
SIGNATURE	Signature, typed or printed na ne of registered agent	and title if applicable. (NOT 3: Registered	Agent signature	required when reinstating) DATE		
12.	OFFICERS ANI			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	FIS IN 12
TITLE	P	☐ DELETE 1,1 TIT	LE		Change	☐ Addition
NAME	THOMPSON, PAUL D	1.2 N	ME			
STREET ADDRESS	6110 SEVEN SPRINGS BLVD.	1.3 ST	REET ADDRESS			Ì
CITY-ST-ZIP	LAKE WORTH FL 33463	1.4 CI	Y-ST-ZIP			
TITLE	В	☐ DELETE 2.1 TH	LE .	SECRETAR1	☐ Change	☐ Addition
NAME	THOMPSON, SANDRA B	2.2 N/	ME			
STREET ADDRESS	6110 SEVEN SPRINGS BLVD.	2.3 ST	REET ADDRESS			İ
CITY-ST-ZIP	LAKE WORTH FL 33463	2.4 C	TY-ST-ZIP			
TITLE	VP	☐ DELETE 3.1 TO	ΊΕ		Change	Addition
NAME	THOMPSON, STEVEN M	3.2 NA	ME			
STREET ADDRE 3S	944 LIGHTHOUSE DRIVE	3.3 ST	REET ADDRESS			
CITY-ST-ZIP	N. PALM BEACH FL 33408	34 C	TY-ST-ZIP			
TITLE	T	DELETE 4.1 TF	1.E		☐ Change	Addition
NAME	THOMPSON, KATHLEEN	4. 2 N	AME			
STREET ADDRESS	944 LIGHTHOUSE DRIVE	4.3 \$7	REET ADORESS			
CITY-ST-ZIP	N. PALM BEACH FL 33408	4.4 CI	TY-ST-ZIP			
TITLE		DELETE 5.1 TI	1E		☐ Change	☐ Addition
NAME		. 5.2 N	ME			
STREET ADDRESS		5.3 ST	REET ADDRESS			
CITY-ST-ZIP		5.4 CI	TY-ST-ZIP			
TITLE		DELETE 6.1 TI	le		☐ Change	Addition
NAME		6.2 NJ	ME			

6.4 CITY-ST-ZIP

CITY-ST-ZIP

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. 561-616-0607