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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G72904 1. Corporation Name

M & M ELECTRIC, INCORPORATED

| Principal Place of Business Mailing Address | | | | | | | | | 1 1021111 0511 10514 11610 16111 0 | 2111 9191 91 811 9 11 | | | |
|---|--|-----------------------|--|--------------------|--------------------|-----------|-----------|---|------------------------------------|-------------------------------------|-------------|------------|------------|
| 10876 SW 91ST AVE. OCALA FL 34481 US | | | 11036 SW 128TH AVE. DUNNELLON FL 34432 US | | | | | | DO NOT WR | ITE IN THIS S | SPAC | E | |
| 00 | | | | | | | • | | Incorporated or Qualifed 08/1983 | | | | |
| Principal Place of Business 2a. Mailing Address | | | | | | | | 4. FEI Number | | | Applied For | | |
| 21 | | | 26 | | | | | <u> 59-2</u> | 2351405 | | | | Applicable |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | | | 5. Certificate of Status Desired \$8.75 Additional Fee Required | | | | | |
| City & State | | | City & State | | | | | 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees | | | | | |
| Zip | Country 25 | 29 | Zip Cou | | | | | 8. This corporation owes the current year Intangible Personal Property Tax. | | | | | |
| 24 | 9. Name and Address of Curre | | stered Agent | 1301 | <u> </u> | | | | e and Address of New | Registered A | gent | | |
| | J. Name and Address of Carre | iit itogic | | - | 81 | Name | | | | . Z. | - | | |
| MANNING, WILLIAM L. | | | | | - | 01 | A .d .d | - /D O P | av Niverbas is Not Asses | table) | | | |
| 11036 SW 128TH AVE. | | | | 82 Street Add | | | S (P.U. B | ox Number is Not Accep | (able) | | | | |
| DUN | INELLON FL 34432 | | | | 83 | | | | | | | | |
| | | | | | 84 | City | | | | FL | 85 | Zip C | ode |
| office or r | to the provisions of Sections 607.05 egistered agent, or both, in the Statum familiar with, and accept the oblig | e of Florionations of | da. Such change was a , Section 607.0505, Flo | orida Stat | utes | the corp | oration | 's board o' | in directors. I fieleby acce | DATE | tment | as reg | istered |
| 12. | OFFICERS A | ND DIRE | CTORS | 13. | | | | ADDIT | TIONS/CHANGES TO O | FFICERS ANI | | | |
| TITLE | DP □ DELETE | | 1.1 TI | TLE | | | | | | ☐ Cr | ange | ☐ Addition | |
| NAME | MANNING, WILLIAM L | | | 1.2 N | AME | | | | | | | | |
| STREET ADDRESS | 11036 SW 128TH AVE. | | | | 1.3 STREET ADDRESS | | | | | | | | |
| CITY-ST-ZIP | DUNNELLON FL | | 1.4 CI | 1.4 CITY-ST-ZIP | | | | | | 1 | i | | |
| TITLE | SD | | ☐ DELETE 2.1 | | .1 TITLE | | 50 |) V | | | X Cr | ange | ☐ Addition |
| NAME | MANNING, MARY KIM | anning, mary kim | | 2.2 N | 2.2 NAME | | | | | | | | |
| STREET ADDRESS | 11036 128TH AVE. | | | 2.3 \$ | TREET | TADDRESS | - | - | | • • • | | | |
| CITY-ST-ZIP | DUNNELLON FL | | | 2.40 | TY-S | ST-ZIP | <u> </u> | | <u> </u> | | | | |
| TITLE | D DELETE | | 3.1 ∏ | 3.1 TITLE | | | | | | C | ange | ☐ Addition | |
| NAME | MANNING, JOHN W. | | • | 3.2 N | AME | | | | | | | | |
| STREET ADDRESS | l . | | 3.3 S | 3.3 STREET ADDRESS | | | | | | | | } | |
| CITY-ST-ZIP | DUNNELLON FL | | 3.4. C | 3.4. CITY-ST-ZIP | | | | | | | | 7.40 | |
| TITLE | V DELETE | | 4,1 TI | 4,1 TITLE | | | | | | C | ange | ☐ Addition | |
| NAME | MANNING, MARJORIE E. | | | 4. 2 N | IAME | | | | | | | | |
| STREET ADDRESS | 11036 SW 128TH AVE. | | | 4.3 \$ | TREE | T ADDRESS | | | | | | | |
| CITY-ST-ZIP | DUNNELLON FL | | | 4.4 C | TY-S | T-ZIP | ļ | | | | | | |
| TITLE | | | ☐ DELETE | 5.1 TI | | | | | * | | | nange | ☐ Addition |
| NAME | | | | 5.2 N | | | | | • | | | | ļ |
| STREET ADDRESS | | | | 5.3 S | TREE | TADORESS | | | | | | | 1 |
| CITY-ST-ZIP | | | | | | T-ZIP | | | | | | | |
| TITLE | | | ☐ DELETE | 6.1 TI | TLE | | | | | | CI | nange | ☐ Addition |
| | | | | 62 N | AME | | 1 | | | | | | |

6.4 CITY-ST-ZIP CITY-ST-ZIP Thereby 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.

STREET ADDRESS

6.3 STREET ADDRESS

FILED Feb 24, 1999 8:00 am

Secretary of State

02-24-1999 90045 033 ***158.75

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