

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G75720

1. Entity Name

APG ELECTRIC, INC.

**FILED**  
**Feb 19, 2001 8:00 am**  
**Secretary of State**

02-19-2001 90032 024 \*\*\*158.75

Principal Place of Business

4825 140TH AVE N  
STE K  
CLEARWATER FL 33762  
US

Mailing Address

4825 140TH AVE N  
STE K  
CLEARWATER FL 33762  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 34-1412413

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

KAVULA, JOHN R.  
4825 140TH AVE N  
STE K  
CLEARWATER FL 33762-3822

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	CD	<input type="checkbox"/> Delete
NAME	GOULDER, EDMUND S.	
STREET ADDRESS	1807 E. 22ND ST.	
CITY-ST-ZIP	CLEVELAND OH 44114	
TITLE	STD	<input type="checkbox"/> Delete
NAME	HEISER, LEONARD S.	
STREET ADDRESS	1807 E. 22ND ST.	
CITY-ST-ZIP	CLEVELAND OH 44114	
TITLE	PD	<input type="checkbox"/> Delete
NAME	KAVULA, JOHN R.	
STREET ADDRESS	4825 140TH AVE N, STE K	
CITY-ST-ZIP	CLEARWATER FL 33762-3822	
TITLE	V	<input type="checkbox"/> Delete
NAME	LIGHTNER, JEROLD B.	
STREET ADDRESS	4825 140TH AVE N STE K	
CITY-ST-ZIP	CLEARWATER FL 33762-3822	
TITLE	V	<input type="checkbox"/> Delete
NAME	RADCLIFFE, THOMAS J.	
STREET ADDRESS	4825 140TH AVE N STE K	
CITY-ST-ZIP	CLEARWATER FL 33762-3822	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN R. KAVULA

2/13/01 (727) 530-0077

Date

Daytime Phone #

CR2E034 (10/00)