

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90048 037 ***150.00

DOCUMENT # G86629

1. Entity Name

HICKS ELECTRIC, INC.

Principal Place of Business

Mailing Address

**1075B-ORIENTA AVE.
 ALTATMONTE SPRINGS FL 32701
 US**

**1075-B ORIENTA AVE.
 ALTATMONTE SPRINGS FL 32701-5015
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2357804

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GORDERT, SHELLEY
 1075B ORIENTA AVENUE
 ALTAMONTE SPRINGS FL 32701**

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
PD	HICKS, JAMES B.		
1075-B ORIENTA AVE	1075-B ORIENTA AVE		
ALTAMONTE SPRINGS FL	ALTAMONTE SPRINGS FL		
STD	HICKS, PATRICIA		
1075-B ORIENTA AVE	1075-B ORIENTA AVE		
ALTAMONTE SPRINGS FL	ALTAMONTE SPRINGS FL		
S	GORDERT, SHELLEY		
1075B ORIENTA AVENUE	1075B ORIENTA AVENUE		
ALTAMONTE SPRINGS FL	ALTAMONTE SPRINGS FL		

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:

Shelley K. Gordert, Vice-President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)