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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	MENT # H2655 ELECTRIC, INC.	7	(9)				NGAN BORN BANK BANK BANK BORN BANK KRUK
Principal Place	of Business	Mailing .	Address		,, , , , , , , , , , , , , , , , , , ,		
O'CULL ELECTI 1136 N.E. OSCE OCALA FL 3446		1136 N.E. OSCEOLA AVENUE OCALA FL 34470-5222 US					
บร						 Date Incorporated or Qualified 10/19/1984 	3a. Date of Last Report 06/07/1996
2. Principal Pl	ace of Business	2a. Maili	ng Address			4. FEI Number	Applied For
21		26				59-2470127	Not Applicable
Suite, Apt	#, etc		, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
22] Crty & State		27 City	& State			& Station Committee Planning	
23	,	28	CA DAMO			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip		Count	у	8. This corporation has liability for i	
24	25	29		30			Yes No
	9. Name and Address of Curr	ent Registered	Agent	8	I Name	10. Name and Address of New Re-	jistered Agent
1136 OCA	JIL, ALAN D. 5 N.E. OSCEOLA AVENUE LA FL 34482			8.	City	dress (P.O. Box Number is Not Acceptab	FL 85 Zip Code
office or n agent 1 a SIGNATURE	egistered agent, or both, in the Sta m familiar with, and accept the ob Signal vic. typed or proborame of registered					poration submits this statement for the pation's board of directors. I hereby accepaint when reinstating)	DATE
12.		IND DIRECTOR		13.		ADDITIONS/CHANGES TO OFFIC	
THILE	PT ALAN D		DELETE	1.1 TITLE	1		Change
NAME	O'CULL, ALAN D. 6377 NW 60 ST			1.2 NAM	1 .	110 SE 5 5+	
STRICET ADDRESS O'TY-ST-ZIP	OCALA FL			1.4 C/TY	نحما	rala A ZIUTI	
THILE	VS		DELETE	2.1 TITLE		Cara, 11 3917 1.	Change
NAME	O'CULL, JANET L.		****	22 NAMI	1		Y
STREET ADDRESS	6377 NW 60 ST			23 STRE	ET ADDRESS 🚨	110 SE S St	•
CHY-S1-ZiP	OCALA FL			2. 4 CITY	I	raig. FT 34471	
TITLE			DELETE	3.1 TETLE			Change Addition
NAME				3.2 NAM			
STREET ADORESS				3.3 STRE	ET ADDRESS		
CITY-ST-ZIP	······································		T Drucer	3.4. CITY			Change Addition
TALE			DELETE	4.1 TITLE]		Change Addition
NAMÉ executadonnese				4. 2 NAV			
STREET ADDRESS					ET ADDRESS		
CITY - \$1 - ZIP TITLE			DELETE	44 CrTY 51 TITLE			Change Addition
NAME				5.2 NAM	1		en armilla Entrantion
STREET ADORESS					ET ADDRESS		
CHY-ST-ZIP				5.4 CITY			
TITLE			DELETE	6.1 TITLE			Change Addition
NAME:				6.2 NAM			- "
STREET ADDRESS					ET ADDRESS		

14. I do 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 suppliemental 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.

FILED

Apr 24 1997 8:00am

Secretary of State