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

**PROFIT CORPORATION ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H84994

(3)

**FILED** 

Feb 09 1998 8:00am

Secretary of State

| FANCH  | ER ELECTRIC COMPANY, I   | NC.   |                                     | <br>  |  |  |
|--|--|---|-------------------------------------|---|--|--|
| Principal Place  | e of Business  | Mailing Address   |                                     |   | OL OVOLE BADAL DIBIL BADAL DIDIL DIBIL IDDA                            |  |
| 8610 N. NEBRASKA AVE. TAMPA FL 33604 US  8610 N. NEBRASKA AVE. TAMPA FL 33064 US |  |   | i.                                  | DO NOT WRITE IN THIS SPACE  |  |  |
|  |  |   |                                     | 3. Date Incorporated or Qualified   |  |  |
| 9 Principal P  | lace of Business   | 2a. Mailing Address                                       |                                     | 11/07/1985<br>4. FEI Number   | Applied For  |  |
| 21   |  | 26  |                                     | 59-2603309  | Not Applicable   |  |
| Suite, Apt.  | #, etc.  | Suite, Apt. #, etc.                                       |                                     |   | \$9.75 Additional  |  |
| 22   |  | 27  |                                     | 5. Certificate of Status Desired  | Fee Required   |  |
| City & State   | 8  | City & Stalo  |                                     | 6. Election Campaign Financing  | \$5.00 May Be  |  |
| 23   |  | 28  |                                     | Trust Fund Contribution   | Added to Fees  |  |
| Zip  | Country  | Zip   | Country                             | 8. This corporation owes or has p   |  |  |
| 24   | 25 S. Name and Address of Curren   | 29<br>t Registered Agent                                  | 30                                  | Personal Property Tax due Jun  10. Name and Address of New R                        |  |  |
|  |  |   | 81 Name                             | 101   | -g   |  |
| FANCHER, ARTHUR E.<br>14450 BELLAMY BROS. BLVD.<br>DADE CITY FL 32525            |  |   | 00 0                                | 82 Street Address (P.O. Box Number is Not Acceptable)                               |  |  |
|  |  |   | 62 Street Add                       |   |  |  |
| UNI  | DE ONT TE GEGEG  |   | 83                                  |   |  |  |
|  |  |   | 84 City                             |   | 85 Zip Code  |  |
|  |  |   | Oily                                |   | FL 85 Zip Code   |  |
| office or re<br>agent. I a   | to the provisions of Sections 607.050:<br>egistered agent, or both, in the State<br>m familiar with, and accept the obliga | of Florida, Such change was                               | authorized by the corpora           | poration submits this statement for the tion's board of directors. I hereby acce    | purpose of changing its registered<br>of the appointment as registered |  |
| SIGNATURE  | Signature, typed or printed name of registered ages  | of and title if applicable (NO                            | 1E. Registered Agent signature requ | ired when reinstaling)  | DATÉ   |  |
| 12.  | OFFICERS AND   |   | 13.                                 | ADDITIONS/CHANGES TO OFFI   |  |  |
| TITLE  | P  | ☐ DELETE  | 1 1 TITLE                           |   | ☐ Change ☐ Addition  |  |
| NAME   | FANCHER, ARTHUR E.   |   | 1.2 NAME                            |   |  |  |
| STREET ADDRESS   | 14450 BELLAMY BROS BLVD  |   | 1.3 STREET ADDRESS                  |   |  |  |
| CITY-ST-ZIP<br>TITLE   | DADE CITY FL   | DELETE  | 1.4 CITY - ST - ZIP<br>2.1 TITLE    |   | Change Addition  |  |
| NAME   | TS<br>Fancher, Alma L.   |   | 2.2 NAME                            |   | C bligge C Notition  |  |
| STREET ADDRESS   | 14450 BELLAMY BROS BLVD  |   | 2.3 STREET ADDRESS                  |   |  |  |
| CITY-ST-ZIP  | DADE CITY FL   |   | 2.4 CITY-ST-7IP                     |   |  |  |
| TITLE  | D/100 0111 16  | DELETE  | 3.1 TITLE                           |   | Change Addition  |  |
| NAME   |  |   | 3.2 NAME                            |   |  |  |
| STREET ADDRESS   |  |   | 3.3 STREET ADDRESS                  |   |  |  |
| CITY-ST-ZIP  |  |   | 3.4. CITY - ST - ZIP                |   | <u>.</u>   |  |
| TITLE  |  | ☐ DELETE  | 4.1 TITLE                           |   | ☐ Change ☐ Addition  |  |
| NAME   |  |   | 4. 2 NAME                           |   |  |  |
| STREET ADDRESS   |  |   | 4.3 STREET ADDRESS                  |   |  |  |
| CITY-ST-ZIP  |  | FT KELFEE   | 4.4 CITY - ST - ZIP                 |   | T 01-2-2   |  |
| TITLE  |  | DELETE  | 5.1 TITLE                           |   | ☐ Change ☐ Addition  |  |
| NAME<br>ATREET ARRESON   |  |   | 5.2 NAME                            |   |  |  |
| STREET ADDRESS   |  |   | 5.3 STREET ADDRESS                  |   |  |  |
| CITY+ST-ZIP<br>TITLE   |  | DELETE  | 5.4 C(TY-ST-Z(P)                    |   | Change Addition  |  |
| NAME   |  | occur   | 62 NAME                             |   | C Change C Addition  |  |
| STREET ADORESS   |  |   | 6.3 STREET ADDRESS                  | •   |  |  |
| CITY-ST-ZIP  |  |   | 6.4 CITY-ST-ZIP                     |   |  |  |
| 14. I hereby c   | ertify that the information supplied wi  | th this filing does not qualify f                         | or the exemption stated in          | Section 119.07(3)(i), Florida Statutes.   | further certify that the information                                   |  |
| indicated of<br>officer or o   | on this annual report or supplemental  | annual report is true and acciver or trustee empowered to | curate and that my signatu          | re shall have the same legal effect as i<br>uired by Chapter 607, Florida Statutes; | f made under oath; that I am an  |  |