

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 28, 2002 8:00 am
Secretary of State

01-28-2002 90030 014 ***150.00

DOCUMENT # J18391

1. Entity Name
GILMORE ELECTRIC COMPANY, INC.

Principal Place of Business

**1368 N KILLIAN DR
 LAKE PARK FL 33403
 US**

Mailing Address

**1368 N KILLIAN DR
 LAKE PARK FL 33403
 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 **59-2676914**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LOVELAND DAVID J
 9174 VALLEY OAK PLACE
 JUPITER FL 33478**

Name

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

City

FL

Zip Code

8. The 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, 2002 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

TITLE **V** ☐ Delete
 NAME **LOVELAND, DANIEL S.**
 STREET ADDRESS **11303 AVERY RD.**
 CITY-ST-ZIP **PALM BCH GARDENS FL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **P** ☐ Delete
 NAME **LOVELAND, DAVID J.**
 STREET ADDRESS **9174 VALLEY OAK PL**
 CITY-ST-ZIP **JUPITER FL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **S** ☐ Delete
 NAME **LOVELAND, ROBERT J.**
 STREET ADDRESS **6146 KENDRICK STREET**
 CITY-ST-ZIP **PALM BCH GARDENS FL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **T** ☐ Delete
 NAME **LOVELAND, RANDALL M**
 STREET ADDRESS **6111 KENDRICK ST.**
 CITY-ST-ZIP **PALM BEACH GARDENS FL 33418**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VP** ☐ Delete
 NAME **LOVELAND, DANIEL J**
 STREET ADDRESS **5765 S.E. ROSEMONT AVE**
 CITY-ST-ZIP **STUART FL 34997**

TITLE **VP** ☒ Change ☐ Addition
 NAME **LOVELAND, DANIEL J.**
 STREET ADDRESS **9174 VALLEY OAK PL.** only Change
 CITY-ST-ZIP **JUPITER, FL**

TITLE **VP** ☐ Delete
 NAME **LOVELAND, DAVID M**
 STREET ADDRESS **6210 UNGERER ST.**
 CITY-ST-ZIP **JUPITER FL 33458**

TITLE ☐ Change ☐ 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]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/11/02
 Date

(561) 882-0401
 Daytime Phone #

CR2E034 (9/01)