FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCU 1. Corporatio	IMENT # J321	26	(1)							
EAS	T BAY ELECTRIC, INC.									
Principal Place of Business Mailing Address										
3803 EAST 11TH STREET P. O. BOX 6528 (ZIP 32404) PANAMA CITY FL 32401		3603 EAST 11TH STREET P. O. BOX 6528 (ZIP 32404) PANAMA CITY FL 32401								
,,						3. Date incorporated or Qualified 3a. Date of Last Report 09/08/1986 05/01/1995				
, .	Place of Business	2a. Mailing Ac	Idress				4. FEI Number			Applied For
21 Suite Apt.	# otc	26					59-2716969			Not Applicable
22]	. #, etc.	Suite, Apt	. #, etc.				5. Certificate of Status Desired			5 Additional Required
City & Stat	te	City & Sta	te				6. Election Campaign Financing		\$5.0	00 May Be
ε σ] - Ζφ	Country	28 Z _I p	· · · · · · · · · · · · · · · · · · ·	Countr	rv		Trust Fund Contribution 8. This corporation has liability for			ed to Fees
24	25	29	3	_	,,			intangibie ta □ No	x under:	s 199.032,
	Name and Address of Curre	ent Registered Ager	nt				10. Name and Address of New F		Agent	
				81	1 Na	ame	· · · · · · · · · · · · · · · · · · ·			
	DAN, TEO M.			82	2 St	reet Addre	ess (P.O. Box Number is Not Acceptab	ie)		
	EAST 11TH STREET AMA CITY FL 32401			83	3					
IAIN	AMA OHI IL OLTUI									
				84	4 Ci	ty		FL	85 2	ip Code
OI IEGISIO	ared agent, or both, in the State of Flo villn, and accept the obligations of, Sec Septet to bred a printer rank of a plant ap-	otion 607.0505, Floric	is aumonzed L la Statutes.	ру гле сод	poran	on s board	ation submits this statement for the pur d of directors. I hereby accept the app	pose or cha pintment as	nging its registere	d agent. I am
12.		nt and site if appricable	(NOTE: FI	lagistered Age	ent sign	ature required	whore reinstating) ADDITIONS/CHANGES TO OFF	DATE ICEDS AND	DIDECT	ODC IN 12
TITLE	PD		ELETE	1 i Title	 :		ADDITIONS/CHANGES TO OFF		Change	
NAME:	JORDAN, TED M.			1.2 NAME				_		
STHEFT ADDRESS	3603 EAST 11TH STREET	•		1.3 STREE	ET ADDF	RESS				
00 Y - \$1 - ZIP	PANAMA CITY FL			1.4 CITY -	ST · ZIP					
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6.4 CITY - ST - ZIP 14. Lob hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Fiorida Statutes, I further certify that the information indicated on this annual report or supplemental 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 13 if changed, or on an attachment with an address.

6.2 NAME

6 3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

ME OF SIGNING OFFICER OR DIRECTOR