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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # J36860

1. Corporation Name BARR ELECTRIC COMPANY

Mailing Address Principal Place of Business 2520 14TH ST S.E. 2520 14TH ST SE WINTER HAVEN FL 33884 WINTER HAVEN FL 33884 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 10/06/1986 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 59-2724062 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zip 8. This corporation owes the current year Intangible Personal Property Tax. □ No 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent BARR SAMMONS, ROBERT O. ress (P.O. Box Number is Not Acceptable) 82 1556 6TH STREET, S.E. STARKET WINTER HAVEN FL 33880 83 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Ban BARR STEVEN ( ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change ☐ DELETE 11 TITLE TITLE BARR, STEVEN C. 1.2 NAME NAME 2520 14TH ST. S.E. 1.3 STREET ADDRESS STREET ADDRESS WINTER HAVEN FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TS TITI F 2.2 NAME NAME BARR, KATHY K. 2.3 STREET ADDRESS 2520 14TH ST. S.E. STREET ADDRESS WINTER HAVEN FL 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Change ☐ Addition 31 TITLE TITLE CHRISTOPHER TOBIN BARR 3.2 NAME NAME 2520 14TH ST SE 3.3 STREET ADDRESS STREET ADDRESS WINTER HAVEN FL 33884 34. CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change □ DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Chance □ DELETE 6.1 TITLE TITLE 6.2 NAME NAME

14. 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 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 12 or Block 13 if changed, promae attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

64 CITY-ST-7IP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

c Ban NAME OF SIGNING OFFICER OR DIRECTOR

FILED Feb 25, 1999 8:00 am

Secretary of State

02-25-1999 90064 002 \*\*\*150.00

CR2E034 (11/98)