

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K62652

1. Entity Name

ELECTRICAL & MECHANICAL SERVICES, INC.

FILED
May 02, 2001 8:00 am
Secretary of State

05-02-2001 90032 013 ***150.00

Principal Place of Business

7906-1 CLARK MOODY
PORT RICHEY FL 34668

Mailing Address

7906-1 CLARK MOODY
PORT RICHEY FL 34668
US

2. Principal Place of Business

3. Mailing Address

12912 Sugar Creek Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Hudson, FL.

Zip

Country

Zip

Country

34669

USA

4. FEI Number 59-2926747

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WINKLES, LONNIE L.
7906-1 CLARK MOODY
PORT RICHEY FL 34668

7. Name and Address of New Registered Agent

Name

Lonnie L. Winkles

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

12912 Sugar Creek Blvd.

City

Hudson

FL

Zip Code

34669

8. The above 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, 2001 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
WINKLES, LONNIE L.
9200 JASMINE BLVD
NEW PORT RICHEY FL 34654 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
ELLIS, FRANK
4210 SHORELINE DR
NEW PORT RICHEY FL 34652 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
12912 Sugar Creek Blvd.
Hudson, FL. 34669

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
9200 Jasmine Blvd.
New Port Richey, FL. 34654

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

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

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

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

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: *Lonnie L. Winkles*

LONNIE WINKLES PRESIDENT

4/2/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)