## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## FILED Sep 16 1997 8:00am Secretary of State

DOCUMENT # K66666 (4)  DICK'S ELECTRIC, INC.						
Principal Place of Business  909 W. 3RD  118 WEST NEW YORK AVE.  SANFORD FL 32771  US		Mailing Address 909 W. 3RD SANFORD FL 32771 US	909 W. 3RD SANFORD FL 32771			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified 3a. Date of Last Report
						02/17/1989 05/01/1996
	ace of Business	2a. Mailing Address	¬			4. FEI Number Applied For
Suite, Apt.	# etc	Suite Ant # etc	Suite, Apt. #, etc.			59-2930781   Not Applicable   \$8.75 Additional
22	, oto.	27	<b>n</b> '			5. Certificate of Status Desired Fee Required
City & State	9	City & State	-t			6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution
Zip	Country	Zip	Country			8. This corporation owes or has paid the current year Intangible
24	25	29	30	0		Personal Property Tax due June 30. Yes No
541	9. Name and Address of Currer	it Hegistered Agent		81	Name	10. Name and Address of New Registered Agent
RAY, T. HULEN 118 WEST NEW YORK AVE. DELAND FL 32720				82 83 84	Street A	riddress (P.O. Box Number is Not Acceptable)  FL 85 Zip Code
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.  SIGNATURE    Signature, typed or printed name of registered agent and late of applicable.   (NOTE: Registered Agent signature required when reinstaling)  DATE						
12.	OFFICERS AN		13.	u Agen	a egnature re	
TITLE	P	DELETE 1.1 YO		TLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
NAME	SCHULTZ, ROBERT		1.2 NAME			Table   Tabl
STREET ADDRESS	<b>90</b> 9 W. THIRD ST.		1.3 STREET ADDRESS		NDDRESS	200
CITY-ST-ZIP	SANFORD FL		1 4 CITY - ST - ZIP		- 2IP	
TITLE	V	☐ DELETE	1	21 TITLE		☐ Change ☐ Addition ☐
NAME	<u>-</u>	AAA 141 ABA		2.2 NAME		
STREET ADDRESS	909 W. 3RD SANFORD FL		2.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	ST DELE			2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME	SCHULTZ, WILLIAM					Stange C Problem
STREET ADDRESS	BAR III ARR				ADDRESS	
CITY-ST-ZIP	SANFORD FL		3 4. CITY-ST-ZIP			
TITLE				4.1 TITLE		☐ Change ☐ Aiddition
NAME	4. 2		4. 2 N	IAME		
STREET ADDRESS	ADDRESS		4.3 \$1	4.3 STREET ADDRESS		
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TITLE				51 TITLE		☐ Change ☐ Aridition
NAME			1	5.2 NAME		
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CITY-ST-ZIP		DELETE	5.4 CI 6.1 Ti		- ZIP	Change Addition
TITLE NAME			6.2 N/			Change L. Abbiton
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP				TY-ST		
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14. I do 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 secence 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, or or an attachment with an address.

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