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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 **DOCUMENT #**

(4)

| SECKMAN FIRE SPRINKLERS OF OCALA, INC. | | | | | |
|--|------------------------------------|--|--|--|--|
| Principal Place of Business | Mai'ng Address | | | | |
| 2326 NE 8TH ROAD OCALA FL 34470 | 2326 NE 8TH ROAD OCALA FL 34470 | | | | |



| | | | | | 3. Date Incorporated or Qualified 02/22/1989 | 3a. Date of Last Report 05/01/1995 |
|--|---------------------------|------------------------|--|--|---|--|
| 2. Principal Plac | ce of Business | 2a. Mailing Addres | 98 | | 4. FEI Number 59-2932935 | Applied For Not Applicable |
| Suite, Apt. # | , etc | 26 Suite, Apt. #, | etc. | | Gertificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | | City & State | | - LON-VI | Election Campaign Financing Trust Fund Contribution | S5.00 May Be Added to Fees |
| Zip | Country 25 | Zip 29 | 30 Co. | intry | This corporation has liability for in Florida Statutes | intangible tax under s. 199.032, □ No |
| | 9. Name and Address of Cu | rrent Registered Agent | | | 10. Name and Address of New R | legistered Agent |
| YATES, DUDLEY C JR 4824 N.E. 9TH STREET OCALA FL 34470 | | | 81 Name82 Street A8384 City | oddress (P.O. Box Number is Not Acceptat | nie; | |

rursuant to the provisions of sections our tools and our tools richard statutes, the above named corporation submits this statement for the purpose of changing its registered officer registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.

| Signature by the parameter depotent special transmitter (NO) 12. OFFICERS AND DIRECTORS | | | 13. | ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|--|-----------------------|----------|----------------------|--|--|
| TITLE | PD | ☐ DELETE | 1 1 TITLE | ☐ Change ☐ Addition | |
| 44ME | YATES, DUDLEY C., JR. | | 1.2 NAME | | |
| STREET ADORESS | 2326 NE 8TH ROAD | | 1.3 STREET ADDRESS | | |
| CITY - ST - 2IP | OCALA FL | | 1.4 CITY - ST - ZIP | | |
| IIILE | | DELETE | 2 1 TITLE | Change Addition | |
| NAME | | | 2.2 NAME | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 2.4 CHY+S1-ZIP | | |
| TITLE | | DETELE | 3 1 TILLE | Change Addition | |
| IAME | | | 3 2 NAME | | |
| STREET ADDRESS | | | 3.3 STMEET ADDRESS | | |
| DITY-ST-ZIP | | | 3.4 CITY - \$1 - 7IP | | |
| ITLE | | □ DELETE | 4 1 TUTLE | Change Addition | |
| NAME | | | 4 2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 44 CHY S1-ZP | | |
| TITLE | | ☐ DELETE | 5 1 TITLE | Charige Addition | |
| NAME | | | 5.2 NAME | | |
| STREET ADORESS | | | 5.3 STREET ADDRESS | | |
| CITY+SI+ZIP | | | 54 CITY ST ZIP | | |
| ITLE | | DELETE | 6 1 T.TLE | Change Addition | |
| IAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| CITY - ST - ZIP | | | 6 4 CITY - ST - ZIP | for the exemption stated in Section 119.07(3)(k), Florida Statutes further | |

I do nereby 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). 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 chapted or on an attachment with an address.

4/20/66 1(352) 368-2220