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

DOCUMENT # K72426

(5)

Jul 25 1997 8:00am Secretary of State

TRACE I	ELECTRIC, INC.	• • • • • • • • • • • • • • • • • • • •			ANN 884 2020 ANN ANN ANN ANN AN
Principal Place	e of Business	Mailing Address			01811 81811 61811 61811 61811 61811 1881
2101 10TH STREET 2101 10TH STREET PALMETTO FL 34221 PALMETTO FL 34221				DO NOT WRITE	IN THIS SPACE
				3. Date Incorporated or Qualified	3a. Date of Last Report
i				03/14/1989	03/12/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 26		26		65-0104032	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State Ci		City & State		6. Election Campaign Financing	\$5.00 May Be
		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has pai	d the current year Intangible
24	[25]		30	Personal Property Tax due June	
	9, Name and Address of Currer	it Registered Agent	81 Name	10. Name and Address of New Reg	elstered Agent
TRACE, CHARLES K., JR. 2101-10TH ST. W. PALMETTO FL 34221				ress (P.O. Box Number is Not Acceptab	le)
63					
			84 City		85 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.					
SIGNATURE					
12.	Signature, typed or printed name of registered age OF FICERS AN	ED DIRECTORS	Registered Agent signature requi	ADDITIONS/CHANGES TO OFFIC	DATE EDS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE	ADDITIONS OF PARTIES	Change Addition
NAME	TRACE, CHARLES K.		1.2 NAME		
STREET ADDRESS	2101 10TH ST.		1.3 STREET ADDRESS		
CITY-ST-ZIP	PALMETTO FL		1.4 CITY-ST-ZIP		
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	TRACE, CHARLES K., JR.		2.2 NAME		
STREET ADDRESS	2101 10TH ST.		2.3 STREET ADDRESS		
CITY-ST-ZIP	PALMETTO FL		2.4 CITY - ST - ZIP		
TITLE	D	DELETE	3.1 TITLE		Change Addition
NAME	BICKNER, KAY TRACE		3.2 NAME	· ·	,
STREET ADDRESS	2101 10TH ST.		3 3 STREET ADDRESS		İ
CITY-ST-ZIP	PALMETTO FL	· · · · · · · · · · · · · · · · · · ·	3 4. CITY-ST-ZIP		
TITLE		☐ DELFTE	4 1 TITLE		Change Addition
NAME			4. 2 NAME		i
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELFTE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		. [
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 THLE		Change Addition
NAME			6.2 NAME		I
STREET ADDRESS			6.3 STREET ADDRESS		I
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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 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 octanood, or on an interchinent with an oddress.

SIGNATURE:

7/22/97

941-122-2374