

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 08, 2005 8:00 am**  
**Secretary of State**

04-08-2005 90035 021 \*\*\*150.00

DOCUMENT # K 84123

1. Entity Name

Ron Pope Electric, Inc



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

4709 N.W. CR 143

Suite, Apt. #, etc.

3. Mailing Address

4709 N.W. CR 143

Suite, Apt. #, etc.

20027996

DO NOT WRITE IN THIS SPACE

City & State  
Jenning Florida

City & State  
Jenning Florida

4. FEI Number

59-3000287

Applied For

Not Applicable

Zip  
32053

Country

United States

Zip  
32053

Country

United States

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name POPE, Ronald S.

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

4709 N.W. CR 143

City Jennings

FL

Zip Code 32053

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME P  
POPE, Ronald Stephan  
STREET ADDRESS 4709 N.W. CR 143  
CITY-ST-ZIP Jennings, FL 32053

TITLE  
NAME ST  
POPE, Barbara Sue  
STREET ADDRESS 4709 N.W. CR 143  
CITY-ST-ZIP Jennings, FL 32053

TITLE  
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IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ronald S. Pope

Ronald S. Pope

4/4/05 386-938 2200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)