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## 2002 UNIFORM BUSINESS REPORT (UBR)

## Apr 29, 2002 8:00 am secretary of State K85649 DOCUMENT # 04-29-2002 90063 038 \*\*\*150 00 NORTON ELECTRIC SERVICES, INC. Principal Place of Business Mailing Address 1898 HARBOR LANE 1898 HARBOR LANE NAPLES FL 34104 NAPLES FL 34104 2. Principal Place of Business 3. Mailing Address 1898 Har 898 Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0130167 Not Applicable Zip Zip \$8.75 Additional 34104 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NORTON, WALTER J. Street Address (P.O. Box Number is Not Acceptable) 1898 HARBOR LANE NAPLES FL 34102 Zip Code City FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Change ■ Addition TITLE ☐ Delete TITLE NORTON, WALTER J. NAME NAME 1898 HARBOR LANE STREET ADDRESS STREET ADDRESS NAPLES FL CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition NORTO, JONOTHAN P. NAME NAME 1923 HARBOR LANE STREET ADDRESS STREET ADDRESS NAPLES FL\_ CITY-ST-ZIP CITY\_ST-ZIP\_ Change TITLE TITLE ☐ Addition Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITI F ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

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