FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **K94355** (0)

1. Corporation Name

R & R ELECTRIC OF NORTH FLORIDA, INC.

Principal Place of Business	Mailing Address
9208 PLUMMER RD. P.O. BOX 62238 JACKSONVILLE FL 32219	9208 PLUMMER RD. P.O BOX 62238 JACKSONVILLE FL 32219

3. Date Incorporated or Qualified: **06/12/1989**
3a. Date of Last Report: **02/03/1995**
4. FEI Number: **59-2998376** — Applied For / Not Applicable
5. Certificate of Status Desired [ ] — **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution [ ] — **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes [ ] Yes [ ] No

2. Principal Place of Business — 21 — Suite, Apt. #, etc. 22 — City & State 23 — Zip 24 — Country 25

2a. Mailing Address — 26 — Suite, Apt. #, etc. 27 — City & State 28 — Zip 29 — Country 30

9. **Name and Address of Current Registered Agent**

BAKER, GARY
114 GREEN AVE
CALLAHAN FL 32011

10. **Name and Address of New Registered Agent**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 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. OFFICERS AND DIRECTORS

TITLE	DP	[ ] DELETE
NAME	SALLETTE, ROBERT A., JR.	
STREET ADDRESS	9208 PLUMMER RD	
CITY, ST, ZIP	JACKSONVILLE FL	
TITLE	DV	[ ] DELETE
NAME	SALLETTE, LINDA W.	
STREET ADDRESS	9208 PLUMMER RD	
CITY, ST, ZIP	JACKSONVILLE FL	
TITLE	DST	[ ] DELETE
NAME	SALLETTE, ANN H.	
STREET ADDRESS	9210 PLUMMER RD	
CITY, ST, ZIP	JACKSONVILLE FL	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

(Six blank blocks: TITLE, NAME, STREET ADDRESS, CITY, ST, ZIP — [ ] Change [ ] Addition)

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntary, furnished and does not qualify for the exemption stated in Section 119.07(1)(e), 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 changed, or on an attachment with an address.

SIGNATURE: Ann H. Sallette Secretary-Treasurer — 2-29-96 — (904) 764-5555

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ann H. Sallette