PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State DIVISION OF CORPORATIONS			
DOCUN 1. Corporation	MENT # L422	22 (4)	)		
	ELECTRIC OF CENTRAL	FL, INC.	•		
Principal Place of Business  524 W 18TH ST  295 W. PINELOCH AVE.  ORLANDO FL 32805 US		Mailing Address % ROBERT BROUGHMAN 295 W. PINELOCH AVE. ORLANDO FL 32806		Date incorporated or Qualified 3a. Date of Last Report	
				01/11/1990	08/11/1995
2. Principal Pla	ice of Business	2a. Mailing Address		4. FE! Namber 59-2985870	Applied For
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	Not Applicable \$8.75 Additional
City & State		City & State		6. Election Campaign Financing	Fee Required  \$5.00 May Be
<b>23</b> ] Zip	Country	<b>28</b>	Country	Trust Fund Contribution	Added to Fees
24	25 9. Name and Address of Curre	29	30	This corporation has liability for in Florida Statutes      Name and Address of New R      Name and Address of New R	□No
Or registere	o the provisions of Sections 607.050; Id agent, or both, in the State of Flor In, and accept the obligations of, Sec	ida. Such change was autho	orized by the corporation's boa	ration submits this statement for the purp rd of directors. Thereby accept the appo	pose of changing its registered office sintment as registered agent. I am
	Signature, typed or printed name of registered agen	r and teel rapplicative.  ID DIRECTORS	(NOTE: Bogestiaco Aprilit squat va respon		DA1E CERS AND DIRECTORS IN 12
THUE	PD	DELETE	13. 1. 1 TITLE	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12  Change Addition
NAME STREET ADDRESS	BROUGHMAN, ROBERT 295 W. PINELOCH AVE		1.2 NAME 1.3 STREET ADDRESS		E034 (
City-St-ZiP	ORLANDO FL		1.4 CHY-ST-7IP		R2E
TITLE	ST PROUCUMAN JOYCE	[_] DELETE	2.1 HILE		☐ Change ☐ Addition 💍
NAME STREET ADDRESS	BROUGHMAN, JOYCE 295 W. PINELOCH AVE		2.2 NAME		
CITY-ST-ZIP	ORLANDO FL		2.3 STREET ADDRESS 2.4 C/TY - ST - 7/P		
TITLE	ST	DELETE	3 1 T TLE		Change Addition
NAME	Broughman, Robert (AS 295 W. Pineloch Ave	ST)T	3.2 NAME		
STREET ADDRESS  OTY-ST-ZiP	ORLANDO FL		3.3 STREET ADDRESS 3.4 CITY - S1 - ZIF		
TITLE		☐ DELETE	4 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
TITLE		DELETE	5 1 TIZLE		Change Addition
NAME		<u> </u>	5 2 NAME		sharige Addition
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP		[7] DSLETE	5.4 CITY - S1 - ZIP		
NAME		DELETE	6.1 THLE 6.2 NAME		Change Addition
STREET ADDRESS			63 STREET ADDRESS		

14. I do hereby 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 this poster 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 over attachment with an address.

SIGNATURE:

SI