DOCUMENT # L43114 1. Entity Name THOMPSON ELECTRIC OF NORTH FLORIDA, INC.						FILED Jul 26, 2000 8:00 am Secretary of State 07-26-2000 90004 017 ***150.00				
Principal Place of Business 108 EAST 27TH STREET JACKSONVILLE FL 32206 US		Mailing Address 100 EAST 27TH STREET JACKSONVILLE FL 32206 US				4 10011021 011 01000 1101 12000 2	(†1.0101.01011.07011.0	1011 01011 011	IN BREE (BOA	
2. Principal Pl	ace of Business	3. Mailing Address								
Suite, Apt. I	#, etc.	Suite, Apt. #, etc.				DO NOT WR	ITE IN THIS SPA			
City & State		City & State		<b>4.</b> F	El Number 59-29839		No	plied For t Applicable		
Zip	Country	Zip	Count	ry	5. (	Certificate of Status Desired		<b>1.75</b> Add Require		
	6. Name and Address of Current	Registered Agent		Name	7. N	ame and Address of New	Registered Age	ent		
THOMPSON, FRED M JR 108 E 27TH STREET JACKSONVILLE FL 32206					ox Number is Not Acceptab			<u></u>		
				City			FL	Zip Cod	e	
9. This corpo	Signature, typed or printed name of registered agent i ration is eligible to satisfy its Intangible equirement and elects to do so.		!  FEE   3; 2000	Min. will be \$7	750.00 · ·	instating) <b>10.</b> Election Campaign F Trust Fund Contributi			0 May Be	
11.	OFFICERS AND		12.	·		I DITIONS/CHANGES TO OF	FICERS AND D	RECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Thompson, fred M Jr 108 E 27Th Street Jacksonville Fl 32206	Delete .					Ċ	] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V THOMPSON, CHRIS 108 E 27TH STREET	Delete	TITLE NAME STREE		``		C	] Change	Addition	
TITLE NAME STREET ADDRESS	JACKSONVILLE FL 32206.	Delete	TITLE NAME STREE	<u> </u>		-	C	] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete					C	] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	Delete		1			C	] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	CITY-	T ADDRESS ST- ZIP				] Change	Addition	
indicated of the corp	ertify that the information supplied with on this report or supplemental report is poration or the receiver or trustee endo or on an attachment of address, the URE:	true and accurate and that n owered to execute this report	ny signati as require RED	ure shall have tr ed by Chapter (	Section he same l 607, Florie	119.07(3)(i), Florida Statutes legal effect as if made under da Statutes: and that my nar	I further certify oath; that I am ne appears in B	that the in an officer lock 11 or )353- The Phone #	nformation or director Block 12 if	







108 EAST 27TH STREET JACKSONVILLE, FLORIDA 32206

July 12, 2000

Division of Corporations Uniform Business Report Filings PO Box 1500 Tallahassee, Fl 32302-1500

Re: 59-2983901

To Whom It May Concern:

Sincerely.

nelioy Pam McElrov

Bookkeeper