1999

1. Corporation Name



MEEKS ELECTRICAL CONTRACTORS, INCORPORATED

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

May 04, 1999 8:00 am Secretary of State

05-04-1999 90124 033 ***150.00

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Principal Place	of Business	Mailing Address				I (SGIIGI) GIO GINE GINI GRISS II	+ 			J., 4,6,, ,66,
7657 103RD STREET P O BOX 7465					-					
#207 #207					(DO NOT INDI	TE IN TOUC	CDACI	_	
JACKSONVILLE FL 32210 JACKSONVILLE FL 32238-046			465		-	DO NOT WRITE IN THIS SPACE				
		US				3. Date Incorporated or Qualifed 04/18/1990				
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		L	App	lied For
21 264	2 Rosselle St.	26				<u>59-3009266</u>			Not	Applicable
Suite, Apt.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired			75 Ac	dditional quired
City & State City & State						6. Election Campaign Financing		\$5	.00	vlay Be
23 Jackso	nulle fl	28			-	Trust Fund Contribution			lded to	
Zip	Country	Zip Country				8. This corporation owes the curr	rent year Inte	angible		
24 3220	1 25 DAA	29	9 30			Personal Property Tax.				
	9. Name and Address of Current	Registered Agent				10. Name and Address of New	Registered /	Agent		
				31 Nan	ne					ł
HOULD, STEPHEN A				CO D No book N						
708 N. 3RD STREET JACKSONVILLE BEACH FL 32250			L		et Addres	s (P.O. Box Number is Not Accept	able)			
JAOI	CONVICEE BEACH 1 E 02250		!	33						
				B4 City			FL	85	Zip C	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statut	es, the ab	ove-nam	ned corpora	ation submits this statement for the	purpose of	changir	ng its r	egistered
office or n	egistered agent, or both, in the State of familiar with, and accept the obligation	st Florida. Stich change was a	utnonzea	ov ine ci	orporation'	s board of directors. I hereby acce	pt the appoir	itment	as reg	istered
SIGNATURE							DATE			
	Signature, typed or printed name of registered agent OFFICERS ANI		13	gent signal	ure required w	her reinstating) ADDITIONS/CHANGES TO OF		D DIRE	СТОЕ	S IN 12
12.	PT OFFICERS AND	DELETE	1.1 T(TL			ABBITTONO/OTIVITOES TO ST	1102110711	Cha		Addition
		ш весете.	1.2 NAN						•	
NAME	MEEKS, RANDALL S		1							1
STREET ADDRESS	5706 SWAMP FOX RD.			EET ADDRE	200					ľ
CITY-ST-ZIP	JACKSONVILLE FL			′-ST-ZIP				Cha	2000	Addition
TITLE	S	(DELETE							ange.	
NAME	MEEKS, DAVID			_						ŧ
STREET ADDRESS	5706 SWAMP FOX RD		2.3 STR	EET ADDRE	ESS					
CITY-ST-ZIP	JACKSONVILLE FL		_	Y-ST-ZIP						Doddina
TITLE	\	☐ DELETE	3.1 TITL	Ε	VP			Cha	ange	Addition
NAME			3.2 NAM	E	- Th	omas, Bryan A 162 Plumosa Dr.				
STREET ADDRESS			3.3 STR	EET ADDRE	ESS 147	162 Plumosa Nr.				
CITY-ST-ZIP			3.4. CIT	Y-ST-ZIP	14	LKSONVIlle F1 327	<u> </u>			
TITLE		☐ DELETE	4.1 TITL	E	İ			Cha	ange	☐ Addition
NAME			4. 2 NA	ΛE						
STREET ADDRESS	·		4.3 STR	EET ADDRE	ESS					
CITY-ST-ZIP			4.4 CIT	-ST-ZIP						
TITLE		☐ DELETE	5.1 TITL	E				☐ Cha	ange	☐ Addition
NAME			5.2 NAM	ΙE						}
STREET ADDRESS			5.3 STR	EET ADDRE	ESS					Ì
CITY-ST-ZIP			5.4 CIT	-ST-ZIP						
TITLE		☐ DELETE	6.1 TITL	E	1			Cha	ange	☐ Addition
NAME			6.2 NAM	ΙE						
STREET ADDRESS			6.3 STR	EET ADDRE	ESS					1
31KEE1 ALDKESS				/-ST-7IP						

14. 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 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, with all other like empowered.

SIGNATURE: