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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

N12257

MID-FLORIDA UTILITY CONTRACTORS ASSOCIATION, INC

Mailing Address Principal Place of Business P.O. BOX 2083 P.O. BOX 2083 WINTER PARK FL 32792 WINTER PARK FL 32792 3a. Date of Last Report 3. Date incorporated or Qualified 08/31/1995 11/21/1985 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business

1 8 08 Pine Barrens 57-0796488 Not Applicable 26 21 \$8.75 Additional 5. Certificate of Status Desired Suite, Apt. #, etc. Suite, Apt. #, etc Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution Horida 28 Urlando 23 8. This corporation has liability for intangible tax under s. 199.032, Country Zip Yes No Florida Statutes 30 29 10. Name and Address of New Registered Agent 25 Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) **GLENNON, LISA** S430 BOWMAN DRIVE - Dame as allowe 83 WINTER PARK PL 32792 Zip Code **B**5 64 City 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature required when reinstating!

INCLE Registered Agent signature required when reinstating! (12/95)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS President Change 12. vice DELETE 1.1 TILLE TITLE Bone, CR2E037 HON-1.2 NAME BARE, KEN 8708 Pine Barrens De. 10 clando 71. 33817 Hast President-Director Multord, Geraldine NAME P.O. BOX 2083 (3712 FAIRWEW OR: #1914) 1.3 STREET ADDRESS STREET ADDRESS 1.4 CITY - ST - ZIP WINTER PARK FL 32792 ☐ Addition CITY-ST-ZIP Change DELETE 21 TITLE TITLE 2 2 NAME MULFORD, GERALDINE 308 Bolender Dr. NAME 23 STREET ADDRESS 308 BOLENDER ROAD Jubundale, H. 33823 STREET ADDRESS 2 4 CITY - ST - ZIP AUBURNDALE FL 33823 Change Addition CITY-ST-ZIP 3 1 TITLE President DELETE TOTE F mason, Jack 3.2 NAME BULLINGTON, RICK NAME 1936 Lee Rd. 3.3 STREET ADDRESS 3712 FAIRVIEW CR.#1914 Winter Park, 78. 3 Secretary / Treasurer Reed, Chuck STREET ADDRESS 32789 34 CITY-ST-ZIP WINTER PARK FL 32792 Addition Change CITY-ST-ZIP DELETE 4 1 TITLE TITLE 4 2 NAME WRIGHT, BOB 590 Ferguson De. NAME 4.3 STREET ADDRESS 3712 FARVIEW CR. #1914 STREET ADDRESS 32805 pelando, 71 4.4 CITY - ST-ZIP WINTER PARK FL 32792 **Addition** CITY - ST - ZIP Change DELETE Director Wolfe, Emile 5 1 TITLE TITLE 5.2 NAME KLUNK, DICK 1936 Lee Rd. NAME 53 STREET ADDRESS P.O. BOX 2083 (3712 FARVIEW CR.#1914) STREET ADORESS Winter Park, 71. 5 4 CITY - ST - ZIP WINTER PARK FL 32792 Addition CITY-ST-ZIP Drector DELETE 6 1 TIELE n TITLE Inghram Grago 5218 U Pine Hills Rd. 6.2 NAME

CITY-ST-ZIP WINTER PARK FL 32792

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 certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 12 if channed, or on an attachment with an address. appears in Block 12 or Block 13 if changed, or on an attachment with an address

6 3 STREET ADDRESS

SIGNATURE:

NAME

ETHERIDGE, SAM

P.O. BOX 2083 (3712 FARVIEW CR.#1914)

TED NAME OF SIGNING OFFICER OR DIRECTOR

Jeb 19, 1996 407-677-847