

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED

97 OCT 14 AM 8:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # N95000004710 (8)

1. Corporation Name

INDEPENDENT ELECTRICAL CONTRACTORS ASSOCIATION,
FLORIDA EAST COAST CHAPTER, INC.

Principal Place of Business

Mailing Address

951 WEST 15TH ST.
RIVIERA BEACH FL 33404

951 WEST 15TH ST.
RIVIERA BEACH FL 33404

REINSTATEMENT 97

2. Principal Place of Business

2a. Mailing Address

21 6670 WHITE DR

26 6670 WHITE DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE B

27 SUITE B

City & State

City & State

23 WEST PALM BEACH FL

28 WEST PALM BEACH FL

24 Zip 33407

Country USA

29 Zip 33407

Country USA

3. Date Incorporated or Qualified
09/29/1995

3a. Date of Last Report
04/24/1996

4. FEI Number
65-0612647

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RAO, JOE
951 WEST 15TH ST.
RIVIERA BEACH FL 33404

81 Name RAO, JOE

82 Street Address (P.O. Box Number is Not Acceptable)

6670 WHITE DR SUITE B

83

84 City WEST PALM BEACH FL

85 Zip Code 33407

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

10/10/97

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME RAO, JOE
STREET ADDRESS 951 WEST 15TH ST.
CITY-ST-ZIP RIVIERA BEACH FL 33404

1.1 TITLE PD
1.2 NAME RAO, JOE
1.3 STREET ADDRESS 6670 WHITE DRIVE SUITE B
1.4 CITY-ST-ZIP WEST PALM BEACH FL 33407

TITLE VD
NAME SPOOR, MARK
STREET ADDRESS 105 CLEARY RD.
CITY-ST-ZIP WEST PALM BEACH FL 33413

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE VD
NAME SULLIVAN, GARY T
STREET ADDRESS 2115 7TH AVE. NORTH, BAY 8
CITY-ST-ZIP LAKE WORTH FL 33461

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE SD
NAME SHARKEY, DONALD
STREET ADDRESS 1620 HILL AVE.
CITY-ST-ZIP MANGONIA PARK FL 33407

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE TD
NAME STRATTON, JIM
STREET ADDRESS 7546 ENTERPRISE DR.
CITY-ST-ZIP RIVIERA BEACH FL 33404

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE

SIGNATURE REQUIRED - JIM RAO

(561) 840-4100

CR2E037 (4/97)