2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P01000018062 DOCUMENT

JENKINS ELECTRICAL CONTRACTORS, INC.



FILED Jul 24, 2003 8:00 am Secretary of State 07-24-2003 90111 020 ***150.00

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Principal Place of Busines 1407 SWISS LN DELTONA FL 32728	S	Mailing Address 1407 SWISS LN DELTONA FL 32728		# 1881/88/ 14/ 88/81/ 1881/ 88/1/ 88/1/ 88/1/ 88/1/ 88/1/ 88/1/ 88/1/ 88/1/ 88/1/ 88/1/ 88/1/ 88/1/
2. Principal Place of Busin	ness	3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES
City & State	<u> </u>	City & State	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4. FEI Number 59-3702698 Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent				
	,		Name	
JENKINS, RICHARD C 1407 SWISS LN			Street Addre	ess (P.O. Box Number is Not Acceptable)
DELTONA FL 32728				
			City	FL Zip Code
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE				
FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
10.	OFFICERS AND I	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE DPVT		☐ Delete	TITLE	☐ Change ☐ Addition
	RICHARD C	•	NAME	
STREET ADDRESS 1407 SWIS			STREET ADDRESS CITY-ST-ZIP	
TITLE S	51011455 C	☐ Delete	TITLE	☐ Change ☐ Addition
	RICHARD C		NAME	
STREET ADDRESS 1407 SWIS			STREET ADDRESS CITY-ST-ZIP	
TITLE	72 02/20	Delete -	TITLE	Change Addition
NAME		below	NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME STREET ADDRESS			NAME STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE	<u> </u>	☐ Delete	TITLE	☐ Change ☐ Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP		<u></u>	CITY-ST-ZIP	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME CORRECT ADDRESS			NAME CTREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

<u>EQUI</u>RED

Date

Daytime Phone #

Affachmen+# 90146130 PO1000018062 DEAN FURIOR DEPT OF STATE, I AM RICHARD TENKINS, PRESIDENT OF JENKINS BEGRICAL CONTRACTORS INC. I PERET TO INFORM YOU THAT THIS NOTICE IS THE GRST NOTICE I'VE RECEIVED From YOU CONCERNING FILING THIS YEAR. I DID -NOT RECEIVE ANY THING WATL NOW. PLEASE WAINE THE LATE FAE. I WILL INTEND TO FILE ON LINE NEXT YEAR SO THAT THIS WILL NOT HAPPEN A GAIN. THANK YOU FOR YOUR COOPERATION. SINCOLOTY,