


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2004 8:00 am
Secretary of State

03-24-2004 90032 049 ***155.00

DOCUMENT # P03000107748					
1. Entity Name SOUTHSIDE ELECTRIC, INC.					
Principal Place of Business PO BOX 720 ORANGE PARK, FL 32067			Mailing Address PO BOX 720 ORANGE PARK, FL 32067		
2. Principal Place of Business PO BOX 720		3. Mailing Address PO BOX 720			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State ORANGE PARK FL		City & State ORANGE PARK FL		4. FEI Number 43-202 9513	
Zip 32067		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent TRACEY, JASPER M 2195 GEORGE WYTHE ROAD ORANGE PARK, FL 32073			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 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: <u>JASPER M TRACEY PRESIDENT</u> DATE: <u>03-22-2004</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input checked="" type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE P NAME TRACEY, JASPER M STREET ADDRESS 2195 GEORGE WYTH ROAD CITY-ST-ZIP ORANGE PARK, FL 32073	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VP NAME TRACEY, JANICE M STREET ADDRESS 2195 GEORGE WYTH ROAD CITY-ST-ZIP ORANGE PARK, FL 32073	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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>Jasper M Tracey</u> JASPER M TRACEY			Date: <u>03-22-2004</u> <small>Daytime Phone #</small> <u>904-343-5109</u>		