

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2008 8:00 am
Secretary of State

02-27-2008 90020 016 ***150.00

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1. Entity Name

MARINE ELECTRONICS INSTALLATION, INC.



Principal Place of Business

738 KELLSTADT STREET NORTHWEST
PORT CHARLOTTE, FL 33952

Mailing Address

738 KELLSTADT STREET NORTHWEST
PORT CHARLOTTE, FL 33952
2756 Vogler Ln.
North Port, FL 34286



DO NOT WRITE IN THIS SPACE

02222008 No Chg-P CR2E034 (11/05)

4. FEI Number

20-5180332

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

INGRAM, JAMES S
738 KELLSTADT STREET NORTHWEST
PORT CHARLOTTE, FL 33952
2756 Vogler Ln.
North Port, FL 34286

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IN THIS SPACE**

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 \$150.00

After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME INGRAM, JAMES S
STREET ADDRESS 738 KELLSTADT STREET NORTHWEST
CITY-ST-ZIP PORT CHARLOTTE, FL 33952

TITLE D
NAME INGRAM, TERRY L
STREET ADDRESS 738 KELLSTADT STREET NORTHWEST
CITY-ST-ZIP PORT CHARLOTTE, FL 33952

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

James S. Ingram

2-22-08

(941) 626-1492