## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

**DOCUMENT #** P19588

(3)

| K & N ELECTRIC, INC.  Principal Place of Business Mailing Address |                                                                        |                                                                  |                                                                 |                                                                                                                                |                                             |
|-------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------|-----------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|
| •                                                                 | •                                                                      | •                                                                |                                                                 |                                                                                                                                |                                             |
| 4909 RONDO<br>FT. WORTH TX 76106                                  |                                                                        | 4909 RONDO<br>FT. WORTH TX 76106                                 |                                                                 |                                                                                                                                |                                             |
|                                                                   |                                                                        |                                                                  |                                                                 | 3. Date Incorporated or Qualified 06/09/1988                                                                                   | 3a. Date of Last Report 05/01/1995          |
| 2. Principal Plac                                                 | e of Business                                                          | 2a. Mailing Address                                              |                                                                 | 4. FEI Number                                                                                                                  | Applied For                                 |
| ו                                                                 |                                                                        | 26                                                               |                                                                 | 75-1460919                                                                                                                     | Not Applicable                              |
| Suite, Apt. #, etc.                                               |                                                                        | Suite, Apt. #, etc.                                              |                                                                 | 5. Certificate of Status Desired                                                                                               | \$8.75 Additional                           |
| 2                                                                 |                                                                        | 27                                                               |                                                                 |                                                                                                                                | Fee Required                                |
| City & State                                                      |                                                                        | City & State                                                     |                                                                 | Election Campaign Financing     Trust Fund Contribution                                                                        | \$5.00 May Be                               |
| Zip                                                               | Country                                                                | 28   Zip                                                         | Country                                                         | 8. This corporation has liability for                                                                                          | Added to Fees                               |
| ]                                                                 | 25                                                                     | 29                                                               | 30                                                              |                                                                                                                                | s Mo                                        |
| L                                                                 | 9. Name and Address of Curre                                           |                                                                  |                                                                 | 10. Name and Address of New I                                                                                                  | Registered Agent                            |
|                                                                   |                                                                        |                                                                  | 81 Name                                                         |                                                                                                                                |                                             |
| CT CORPORATION SYSTEM                                             |                                                                        |                                                                  | 82 Street Ado                                                   | ress (P.O. Box Number is Not Acceptal                                                                                          | ble)                                        |
| 1200 S. PINE ISLAND ROAD                                          |                                                                        |                                                                  |                                                                 |                                                                                                                                |                                             |
| PLANTA                                                            | TION FL 33324                                                          |                                                                  | 83                                                              |                                                                                                                                |                                             |
|                                                                   |                                                                        |                                                                  | 84 City                                                         |                                                                                                                                | 85 Zip Code                                 |
|                                                                   |                                                                        |                                                                  |                                                                 | ration submits this statement for the pu                                                                                       | FL   65   240 C006                          |
| i2.<br>ITLE                                                       | Ignature, typec or printed name of registered ago<br>OFFICERS A<br>CST | ent and title if applicable  IND DIRECTORS  DELETE               | (NOTE: Registered Agent signature required 13.                  |                                                                                                                                | FICERS AND DIRECTORS IN 12  Change Addition |
| NAME                                                              | NELSON, JERRY L.                                                       | L' pettit                                                        | 1.2 NAME                                                        |                                                                                                                                |                                             |
| STREET ADDRESS                                                    | 4909 RONDO                                                             |                                                                  | 1.3 STREET ADDRESS                                              |                                                                                                                                |                                             |
| CITY-ST-ZIP                                                       | FORT WORTH TX                                                          |                                                                  | 1.4 CITY - ST- ZIP                                              |                                                                                                                                |                                             |
| ITLE                                                              | P                                                                      | DELETE                                                           | 2 1 TITLE                                                       |                                                                                                                                | Change Addition                             |
| IAME                                                              | NELSON, CURTIS L.                                                      |                                                                  | 2 2 NAME                                                        |                                                                                                                                |                                             |
| STREET ADDRESS                                                    | 4909 RONDO                                                             |                                                                  | 2 3 STREET ADDRESS                                              |                                                                                                                                |                                             |
| ITY-ST-ZIP                                                        | FORT WORTH TX                                                          | T DELETE                                                         | 2 4 CHY-SI-ZIP                                                  |                                                                                                                                | Change Addition                             |
| ITLE                                                              | d<br>Nelson, Jerry L.                                                  | ☐ btren                                                          | 3 1 TITLE<br>32 NAME.                                           |                                                                                                                                | Change Addition                             |
| NAME<br>STREET ADDRESS                                            | 4909 RONDO                                                             |                                                                  | 3.3. STREET ADDRESS                                             |                                                                                                                                |                                             |
| CITY-ST-ZIP                                                       | FORT WORTH TX                                                          |                                                                  | 3.4 CITY- \$1-2IP                                               |                                                                                                                                |                                             |
| ITLE                                                              | D                                                                      | DELETE                                                           | 4. 1 TITLE                                                      |                                                                                                                                | Change Addition                             |
| IAME                                                              | NELSON, CURTIS L.                                                      |                                                                  | 4.2 NAME                                                        |                                                                                                                                |                                             |
| STREET ADDRESS                                                    | 4909 RONDO                                                             |                                                                  | 4.3 STREET ADDRESS                                              |                                                                                                                                |                                             |
| CITY-ST-ZIP                                                       | FORT WORTH TX                                                          |                                                                  | 4.4 CITY-ST-ZIP                                                 |                                                                                                                                |                                             |
| ITLE                                                              |                                                                        | DELETE                                                           | 5. 1 TITLE                                                      |                                                                                                                                | Change Addition                             |
| IAME                                                              |                                                                        |                                                                  | 5.2 NAME                                                        |                                                                                                                                |                                             |
| TREE1 ADDRESS                                                     |                                                                        |                                                                  | 5 3 STREET ADDRESS                                              |                                                                                                                                |                                             |
| DITY-ST-ZIP<br>DITLE                                              |                                                                        | DELETE                                                           | 54 CITY-S1-ZIP<br>6 1 TITLE                                     |                                                                                                                                | Change Addition                             |
| NAME                                                              |                                                                        |                                                                  | 6.2 NAME                                                        |                                                                                                                                |                                             |
| STREET ADDRESS                                                    |                                                                        |                                                                  | 6.3 STREET ADDRESS                                              |                                                                                                                                |                                             |
| CITY-S1-ZIP                                                       |                                                                        |                                                                  | 6.4 CITY - ST-ZIP                                               |                                                                                                                                |                                             |
| certify that                                                      | the information indicated on this ar                                   | nnual report or supplemental<br>cooration or the receiver or tru | annual report is true and accu-<br>ustee empowered to execute t | for the exemption stated in Section 11<br>rate and that my signature shall have th<br>his report as required by Chapter 607, I | ne same logal effect as if made unde        |

SIGNATURE:

TURE AND THEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/96 817-626-2885 Date: Daytine Priorie #