

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Aug 13 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P29861 (2)
1. Corporation Name
UNIVERSAL ELECTRIC COMPANY INC.

Principal Place of Business
P O BOX 2372
8794 COMMERCE DR
BONITA SPRINGS FL 33959-9372
US

Mailing Address
P O BOX 2372
BONITA SPRINGS FL 33959-9372

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/22/1990

4. FEI Number

35-0725050

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

2. Principal Place of Business

21 24331 PRODUCTION CIRCLE

Suite, Apt. #, etc.

22 SUITE #1

23 City & State
BONITA SPRINGS, FL

24 Zip
34135-2372

25 Country
LEE

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

BUENNAGEL, DONALD R.
4835 BONITA BEACH RD
#210
BONITA SPRINGS FL 33923-34134

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code
34134

11. Pursuant to the provisions of sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME BUENNAGEL, DONALD R.
STREET ADDRESS 4835 BONITA BCH RD #210
CITY-ST-ZIP BONITA SPRINGS FL

TITLE SVD ☐ DELETE

NAME BUENNAGEL, JOANNE M.
STREET ADDRESS 4835 BONITA BCH RD #210
CITY-ST-ZIP BONITA SPRINGS FL

TITLE SD ☐ DELETE

NAME HEATH, DAVID D. 325 MAIN ST
STREET ADDRESS RR #1 BOX 25 P.O. BOX 25
CITY-ST-ZIP NO. WEBSTER IN

TITLE TD ☐ DELETE

NAME HEATH, SUSAN J. 325 MAIN ST
STREET ADDRESS RR #1 BOX 25 P.O. BOX 25
CITY-ST-ZIP NO. WEBSTER IN

TITLE C ☐ DELETE

NAME BUENNAGEL, J. CLIFFORD
STREET ADDRESS 3450 GULF SHORE BLVD 309
CITY-ST-ZIP NAPLES FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

6-6-98 941-495-3399

CR2E034 (5/98)