## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000025962 1. Corporation Name

GREGIS YOUNG ELECTRIC INC.

## **FILED** Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90047 029 \*\*\*150.00

untu 3	TOOMS LECTING, IN								
Principal Place of Business Mailing Address									
4984 17TH PLACE S.W. 4984 17TH PLACE S.W.									
NAPLES FL 34116 NAPLES FL 34116						DO NOT WRITE IN THIS	SPACE		
						3. Date (ncorporated or Qualifed			
						04/05/1993			
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied For			
21		26	26			65-0400651	No	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired   \$8.75 Additional Fee Required			
City & State City & State 23 28						6. Election Campaign Financing Trust Fund Contribution		May Be to Fees	
Zip	Country Zip			ntry		This corporation owes the current year Inta Personal Property Tax.	angible Yes	MNo	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
YOUNG, GREG S 4984 17TH PLACE S.W. NAPLES FL <del>'93999-</del>				83	33				
office or r	to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the ob	tate of Florida. Such change was	authorized	lby th	named cor he corporat	poration submits this statement for the purpose of tion's board of directors. I hereby accept the appoin	changing its	registered	
	Signature, typed or printed name of registered	<del></del>	<del></del>	Agent :	signature requir	red when reinstating) DATE			
12.	OFFICERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	ORS IN 12	
TITLE	D COLUMN CONTROL	☐ DÉLETÉ	1.1 ΠΤ				™ Change	∐ Audilloi	
NAME	YOUNG, GREG S		1.2 NA		Į				
STREET ADDRESS				1.3 STREET ADDRESS		<b>4.</b>			
CITY-ST-ZIP	NAPLES FL 33999			TY-ST-	ZIP	34116	Change	☐ Addition	
TITLE		☐ DELETE	2.1 TIT				∟Jurange		
NAME			2.2 NA		(				
STREET ADDRESS			2.3 ST	REETA	ADDRESS	,			
CITY-ST-ZIP			_	TY-ST-	ZIP	<u> </u>			
TITLE		☐ DELETE	3.1 TIT	T.E	- 1		☐ Change	☐ Additior	

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, with all other like empowered.

3.2 NAME

4.1 TITLE

4.2 NAME

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

□ DELETE

DELETE

DELETE

3.3 STREET ADDRESS

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

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3.4. C(TY-ST-ZIP

SIGNATURE: Gra

NAME

TITLE NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

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CITY-ST-ZIP

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CITY-ST-ZIP

☐ Change

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☐ Addition

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