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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthami Secretary of State

1996

DIVISION OF CORPORATIONS P93000073670 (0) DOCUMENT #

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E. C. C. ELECTRONICS, INC. Principal Place of Business Mailing Address 14091-C EMERALD COAST PKWY 14091-C EMERALD COAST PKWY DESTIN FL 32541 DESTIN FL 32541 3. Date Incorporated or Qualified 3a. Date of Last Report 10/25/1993 05/01/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 63-1106749 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip $Z_{\rm IP}$ Country This corporation has liability for intangible tax under s. 199.032. Florida Statutes Yes No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GRIMMER, JAMES B 82 Street Address (P.O. Box Number is Not Acceptable) 14063 EMERALD COAST PKWY AZ EMERALD COAST CENTER DESTIN FL 32541 City Zip Code 85 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. Thereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE INDITE. Registered Agent signature remined when reinstation Signature, typied or printed name of registeres; agent and the if application OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1 1 TITLE THILE Change Addition NAME GRIMMER, JAMES B 1.2 NAME STREET ADDRESS 14063 EMERALD COAST PKWY EMERALD COAST CTR 1.3 STREET ADDRESS DESTIN FL 32541 1.4 CIEY - ST - ZIP CITY - ST - ZIP DELETE. **XX**Change Addition TITLE 2 A TITLE NAME GRIMMER, SAMUEL P 2.2 NAME 200 Green Springs Highway 2000 B SOUTHBRIDGE PKWY SUITE 100 2.3 STREET ADORESS STREET ADDRESS Birmingham, Alabama 35209-4906 BIRMINGHAM AL 35209 CITY - ST - ZIP 2 4 CITY - ST - ZIP THLE DELETE 3 1 DELE KChange Addition NAME GRIMMER, SUSAN L 3.2 NAME 2000 B SOUTHBRIDGE PKWY SUITE 100 200 Green Springs Highway 3.3. STREET ADDRESS STREET ADDRESS 35209-4906 Birmingham, Alabama BIRMINGHAM AL 35209 CITY-ST-ZIP 3.4 CITY - ST - ZIP DELETE Change Addition TITLE 4 1 TOLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST-ZIP DELETE Change Addition TITLE 5 1 Title NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADORESS CITY-ST-ZIP 5 4 CITY - ST - ZIP ☐ Add-tion DELETE Change TITLE 6 LUDE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

64 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 indicated with an address

SIGNATURE:

CHTY-ST-ZIP

NTED NAME OF SIGNING OFFICER OR DIRECTOR

Distriction Program is

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