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

**PROFIT CORPORATION** ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P93000073670 (0) Corporation Name

F. C. C. FI FCTRONICS, INC.

**FILED** Feb 26 1998 8:00am Secretary of State

Dissipal Dissert Projects	Malling Add		<u> </u>		
Principal Place of Business Mailing Address  200 GREEN SPRINGS HWY. 200 GREEN SPRINGS HWY				· ·	
GREEN SPRINGS SHOPPING CENTER GREEN SPRINGS SHOPPING BIRMINGHAM AL 352094906 BIRMINGHAM AL 352094906			t		
				DO NOT WRITE IN TI	HIS SPACE
				3. Date Incorporated or Qualified 10/25/1993	
2. Principal Place of Business				4. FEI Number	Applied For
Suite, Apt. #, etc. Suite, Apt. #, etc.		· · · · · · · · · · · · · · · · · · ·		63-1106749	Not Applicable
Suite, Apt. #, etc.	Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State			<del></del>	8. Election Campaign Financing	\$5,00 May Be
23	28			Trust Fund Contribution	Added to Fees
Zip Country	Zip Country		у	8. This corporation owes or has paid the	current year Intangible
24 25	29 30		Personal Property Tax due June 30.	Yes No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent  ADMINISTRATES R 81 Name					
GRIMMER, JAMES B			Name		
14063 EMERALD COAST PKWY EMERALD COAST CENTER DESTIN FL 32541		82	Street Addr	ess (P.O. Box Number is Not Acceptable)	
		83			
		03			
		84	City	1	B5 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, t			re-named corp		
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 trike if applicable. (NOTE: Regist			ent signature require	ed when reinstating} DA	
12. OFFICERS AND		13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS	
11161	D DELETE  GRIMMER, JAMES B				Change Addition
44000 EMEDALO COACT DIVING EMEDALO COACT CTD		1.2 NAME			2
OCCTINI CI GOEAA	T EMEINED CONDITION	1.3 STREE	T ADDRESS		ļi.
TITLE D			51-21	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME GRIMMER, SAMUEL P		2.2 NAME			
	AND OBECH ODDINGS HIGHWAY		T ADDRESS		
CITY-ST-ZIP BIRMINGHAM AL		2. 4 CITY -		. <del>M</del> t.	
TITLE D	DELETE	3.1 TITLE			Change Addition
NAME GRIMMER, SUSAN L		3.2 NAME			
	200 GREEN SPRINGS HIGHWAY		T ADDRESS		and the second of the second o
CITY-ST-ZIP BIRMINGHAM AL		3.4. CITY-	ST-ZIP	The state of the s	
TITLE	DELETE	4.1 TITLE		The second secon	☐ Change ☐ Addition
NAME		4. 2 NAME			ĺ
STREET ADDRESS		4.3 STREET	r address		
CITY-ST-ZIP			ST - ZIP		1 06 and 1 4 and 1 1
TITLE	DELETE				☐ Change ☐ Addition
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET			1
CITY-ST-ZIP	DELETE	5.4 CITY - 8	ST - ZIP		Change Addition
THLE	נ_ טכנכונ	6.1 TITLE			C Orlange C Addition
NAME etect annuese		62 NAME	2020004		
STREET ADDRESS		6.3 STREET 6.4 City-5	t t		ļ
CITY-ST-ZIP  14. I hereby certify that the information supplied with	h this filing does not qualify fo			Section 119.07(3)(i), Florida Statutes. I furthe	r certify that the information

indicated on this annual report of pupplemental 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 of 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 or an attachment with an address.