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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000016544 (6)

MADISON STARTERS & ALTERNATORS, INC.

Principal Place of Business	Mailing Address	
200 W. PINCKNEY STREET MADISON FL 32340	200 W. PINCKNEY STREET MADISON FL 32340-2432	

FILED Apr 25 1997 8:00am Secretary of State



Principal Plac	NEY STREET	Mailing Address							
MADISON FL		MADISON FL 3234	0-2432						
					3. Date Incorporated or Qualific 02/28/1994	od 3a. Date o		eport	
2. Principal P	lace of Business	2a. Mailing Addre	ss		4. FEI Number		Ap	plied For	
21 26					59-3295937				
Sulte, Apt.		27			5. Certificate of Status Desired See Required Fee Required				
City & Stat	е	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
23		28	Court		Trust Fund Contribution	<u> </u>			
Zip	Country	Zφ	Count	ry	8. This corporation has liability Florida Statutes	for intangible tax ↑ 🛄 Yes	under s. Jo	199.032,	
24	25 9. Name and Address of Cur	29 29 Agent	[30]		10, Name and Address of New				
		Total Trogic Control Trigger	8	1 Name					
LUNDY, SHARON P 200 W. PINCKNEY STREET				Dawson, Robert W. 82 Street Address (P.O. Box Number is Not Acceptable)					
	DISON FL 32340		8	302	ot Address (P.O. Box Number is Not Acceptable) 02 Maple Street				
- REACH	DIVVIT I L VEVTV		8						
•			<u>-</u>	4 City		Ta	5 Zip 0	Corto	
_	•		6	4 City L ive	oak	FL °	5 Zip (060	
agent. I a	Stynature, typed or printed name of registered	ayent and tile if applicable	(NOTE: Registered A	08. — Pakamaal	poration submits this statement for thation's board of directors. I hereby ad a light of the statement for the statement	DATE DATE	197	?	
12.		AND DIRECTORS DE	.ETE 1,1 TITLE	<u> </u>	ADDITIONS/CHANGES TO O		Change	Addition	
TITLE	D LUNDY, J H		1.2 NAM			_	Ondings.		
NAME STREET ADDRESS	ROUTE 3, BOX 225			ET ADDRESS					
CITY-ST-ZIP	LIVE OAK FL 32060		1.4 CITY						
TITLE	D	Z D€					Change	Addition	
NAME	LUNDY, SHARON P		2 2 NAM	E					
STREET ADDRESS	ROUTE 3, BOX 225		23 SIRE	ET AUDRESS					
CITY-ST-ZIP	LIVE OAK FL 32060		2 4 CITY	'-ST-ZIP					
TITLE	VP .	D(ETE 31 THLE	P	resident	X	Change	Addition	
NAME	DAWSON, ROBERT W		3.2 NAM	£					
STREET ADDRESS	302 MAPLE ST		3.3 STRE	ET ADDRESS					
CITY-ST-ZIP	LIVE OAK FL			'- \$1 - ZIP	1			T a a rec	
TITLE		☐ DE					Change	Addition	
NAME			4. 2 NAN						
STREET ADDRESS				£1 ADDRESS					
CITY-ST-ZIP		DE	4.4 CITY				Change	Addition	
TITLE		[] Ut	4				Smirigir	C. I SUGMON	
NAME ATOTET ADDOSOO			5.2 NAM						
STREET ADDRESS				ET ADDRESS					
CITY-ST-ZIP TITLE		DE	5.4 CITY ETE 61 TITLE				Change	Addition	
NAME		L 01	6.2 NAM				ø.		
STREET ADDRESS			•	ET ADDRESS					
			6.4 CITY	!					
CITY-ST-ZIP	by satisfy that the latera etter our	sting with thin films door a			od in Section 119.07(3)(i) Florida Sta	tutos I further co	artify that	the	

necess of energy centry that the information supplied with 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 path; that it 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 are an attachment with an address.