

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

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Apr 23, 1999 8:00 am  
Secretary of State

04-23-1999 90240 025 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000042575

1. Corporation Name  
CUSTOM ELECTRONICS & SECURITY, INC.

Principal Place of Business  
133 EGLIN PARKWAY S.E.  
FT. WALTON BEACH FL 32548

Mailing Address  
133 EGLIN PARKWAY S.E.  
FT. WALTON BEACH FL 32548

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/03/1994

4. FEI Number

59-3251823

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 the current year Intangible  
Personal Property Tax.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

SKIPPER, DORIS H  
133 EGLIN PARKWAY S.E.  
FT. WALTON BEACH FL 32548

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

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P Skipper, Michael A
NAME	SKIPPER, MICHAEL A.	1.2 NAME	244 Yacht Club Dr
STREET ADDRESS	#13 PINEHURST	1.3 STREET ADDRESS	71 Walton Beach, FL 32548
CITY-ST-ZIP	SHALIMAR FL	1.4 CITY-ST-ZIP	71 Walton Beach, FL 32548
TITLE	V	2.1 TITLE	V Skipper, Doris H
NAME	SKIPPER, DORIS H.	2.2 NAME	3201 W 13th St Unit D
STREET ADDRESS	3201 W 13TH ST	2.3 STREET ADDRESS	Panama City, FL 32401
CITY-ST-ZIP	PANAMA CITY FL	2.4 CITY-ST-ZIP	5th Skipper, Melodee J
TITLE	ST	3.1 TITLE	244 Yacht Club Dr
NAME	SKIPPER, MELODEE J.	3.2 NAME	701 Walton Beach, FL 32548
STREET ADDRESS	#13 PINEHURST	3.3 STREET ADDRESS	
CITY-ST-ZIP	SHALIMAR FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-8-99

Date

850 664-6464

Daytime Phone #

CR2E034 (11/98)