## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # P94000075674 (9) 1. Corporation Name PERREAULT ELECTRIC, INC.					
Principal Place of Business		Mailing Address	Mailing Address		BOYAN BOSHL HOOD! BINIO DIKUL KADEL DIĞI 1901
7808 CLUBHOUSE ESTATES DRIVE ORLANDO FL 32819		P.O. BOX 690755 ORLANDO FL 32869-0755			
		US		3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal Pla	ace of Business	2a. Mailing Address		10/12/1994 4. FEI Number	04/18/1995
21			artmouth	59-3268275	Applied For Not Applicable
Suite, Apt. 4	#, etc.	Suite, Apt. #, etc.	3.1.300	5. Certificate of Status Desired	- \$8.75 Additional
City & State		27 井 13 6			Fee Required
23	1	City & State 28 AUTURA		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be
<i>Z</i> ip	Country	Zip	Country .	B. This corporation has liability for in	Added to Fees
24	25	29  CO	30 US A	Florida Statutes	No No
	9. Name and Address of Curr	rent Registered Agent	041 1)	10. Name and Address of New Re	gistered Agent
LIIONO	HALF P COO		81 Name		
	Julie e esq. Uth orange avenue		82 Street Add	ress (P.O. Box Number is Not Acceptable	3)
	00 FL 32801		83		
J J			84 City		
			,		FL   85   Zip Code
	o the provisions of Sections 607.05 ed agent, or both, in the State of Fi h, and accept the obligations of, Se		s, the above-named corpord by the corporation's boa	oration submits this statement for the purp ard of directors. I hereby accept the appoi	ose of changing its registered office ntment as registered agent. I am
SIGNATURE _	Signature, typed or printed name of registered ag				
12.		AND DIRECTORS	E: Registered Agent signature require  13.	ed when revistating) ADDITIONS/CHANGES TO OFFICE	DATE PERS AND DIRECTORS IN 10
TITLE	PSTD	☐ DELETE	1. 1 TITLE	ADDITIONS OF ANGLES TO OFFIC	Change Addition
NAME	PERREAULT, SHANE W		1.2 NAME	4	<i>-</i>
STHEET ADDRESS	7608 CLUBHOUSE ESTAT	e <del>s drive</del>	1.3 STREET ADDRESS	100 E. DOUT MOUTH	77-138
01/Y-S1-ZIP 11/LE	-ORLANDO FL-82810-	T DELETE	1.4 CITY-ST-ZIP	100 E. DEET MUNT LUIDTE CO 80014	<u> </u>
NAME		DELETE	5. 1 111/16	·	Change Addition
STREET ADORESS			2 2 NAME 2 3 STREET ADDRESS		
City+St-ZiP			2.4 City-St-Zip		
TITLE		☐ DELETE	3. 1 TITLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		ET DELETE	3.4 CITY - \$1 - ZIP		
TITLE NAME		☐ DELETE	4.1 TITLE		Change Addition
STREET ADDRESS			4.2 NAME 4.3 STHEET ADDRESS		
CITY-SI-ZIP			4.4 City-ST-ZIP		
TITLE		☐ DEL€1E	5. 1 TITLE		Change Addition
NAME			5 2 NAME		Record V Broad
STREET ADDRESS	•		5 3 STREET ADDRESS		
CIFY-S1-ZIF		E Antiere	5.4 CITY - ST - ZIP		
TITLE NAME		☐ DEFELE	6 1 TITLE		Change Addition
STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. I do hereby	certify that the information supplied	with this filing is voluntarily furnis	hed and does not qualify for	or the exemption stated in Section 119.07	(3)(k), Florida Statutes. I further
oath; that I	am an officer or director of this ari	poration or the receiver or trustee	arreport is true and accura empowered to execute this	te and that my signature shall have the sa s report as required by Chapter 607, Floric	
appears in t	Block 12 or Block 11 it charlged, or	on an attachment with an addres	7	- ,	
SIGNATU		OR PRINTED NAME OF SIGNING OFFICER	OR DIRECTOR	Date	Daytore Phyric #