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

PROFIT CORPORATION **ANNUAL REPORT**



FILED

May 02 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P9400081613 (9) CRUMP ELECTRIC SERVICES, INC.						
Principal Place	e of Business	Mailing Address				BOIN BOIN SEEL NAME BOIN 1001
22105 U.S. 19 NO. 22105 U.S. 19 NO.						
CLEARWATER FL 34625 CLEARWATER FL 34625-2365			365		}	
					3. Date Incorporated or Qualified 11/04/1994	3a. Date of Last Report 04/02/1996
2. Principal Pi	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-3271491	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27			b. Certificate of Statos Desired	Fee Required
City & State	e	City & State	,		6. Election Campaign Financing	\$5.00 May Be
23		28	1 6		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Countr	у	8. This corporation has liability for i	
24	25 g. Name and Address of Current	29 Registered Agent	30		Florida Statutes 10. Name and Address of New Re	Yes No
Ani		Mariera Maile	81	Name	IV. Hanne and Address of New Ne	Rioraign WReilf
	IMP, WILLIAM) - 4TH STREET NORTH					
	ETY HARBOR FL 34695		82	Street Add	dress (P.O. Box Number is Not Acceptab	ble)
ОАГ	EIT HANDUR FL 34093		83	 		
						j
			84	City		EL 85 Zip Code
SIGNATURE	to the provisions of Sections 607.0502 egistered agent, or both, in the State or m familiar with, and accept the obligati Signature typed or pirited name of registered agent				rporation submits this statement for the pation's board of directors. I hereby acceptions the province when reinstains the statement of the province when the pr	purpose of changing its registered of the appointment as registered
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TITLE	P	☐ DELÉTE	1.1 TITLE			Li Change
NAME	CRUMP, WILLIAM		1.2 NAME];
STREET ADDRESS	1220 · 4TH STREET NORTH		1.3 STREE	1 ADDRESS		
CITY-ST-ZIP	SAFETY HARBOR FL 34695		1.4 CITY-	ST-7IP		
TITLE	V TARA	☐ DELETE	2.1 TO LE			☐ Change ☐ Addition
NAME	CRUMP, TODO		2.2 NAME			
STREET ADDRESS	2951 ST. JOHNS DRIVE CLEARWATER FL 34619		•	T ADDRESS		1
CITY-ST-ZIP TITLE	ST ST	DELETE	2 4 City- 3 1 Title	-S1 - Z)P		Change Addition
EIILE	ORUMP, REBECCA	CT OFCUE	3.2 NAME			Li Change Li Addition
	TESU - 4TR STREET NORTH			T ADDRESS	<i>,</i> .	Ì
CITY-ST-ZIP	SAFETY HARBOR FL 34695		3.4. CITY-			ļ
TITLE		DELFTE	4,1 1111.6	31-211		Change Addition
NAME			4 2 NAME			- Similar
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			4,4 C/TY-	- 1		1
TITLE		DELETE	5 1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			5,4 CITY-	J		1
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
PTOTET ADDDESS			6.6.67056			

14. do 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 offect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee ampowered 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.