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



COR ANNU	ORPORATION INUAL REPORT  1996  FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS							
DOCUN 1. Corporation	MENT # P9500	00009608 (7	7)					
	L ELECTRIC, INC.	•	•					
					# 188#### 181##########################			A BIAT LA LILITARI
Principal Place	of Business	Mailing Address	·					F6181   F11   JJ#
614 RED ROBIN RD. 614 RED ROBIN RD.								
SEFFNER FL 33584 SEFFNER FL 33584								
					3. Date Incorporated or Qualified 02/06/1995			
2. Principal Pla	ice of Business	2a. Mailing Address			4. Ft Number	1 1	-   - ( 	45 Applied For
21 501 S	. Faulkenburg vol .	26			54-330748	36		Vot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Cortificate of Status Desired			Additional Required
City & State		City & State			Election Campaign Financing     Trust Fund Contribution	[¥	\$5.00	May Be
Ziρ Country Zip			Cour	itry	8. This corporation has liability for			d to Fees 199.032,
24 33619	9. Name and Address of Curre	29 ent Registered Agent	30		Florida Statutes Yes  10. Name and Address of New	s <b>M</b> No	A	
		The state of the s		B1 Name	To. Name and Address of New I	registered	Agent	
YANGER, WILLIAM E				82 Street Add	ess (P.O. Box Number is Not Accepta	ble)		
	Robin Rd. R Fl. 33584		ļ.,	83				
OLI I IILI	11 1 33004							
				B4 City		FL		Code
<ol> <li>Pursuant to or registere</li> </ol>	o the provisions of Sections 607.050 ad agent, or both, in the State of Flo	12 and 607,1508, Florida Staturida. Such change was author	utes, the abovized by the co	e-named corpor proporation's boar	abon submits this statement for the pured of directors. Thereby accept the app	rpose of cha	anging its re	egistered office
familiar with SIGNATURE	n, and accept the obligations of, Sec	ction 607.0505, Florida Statute	9S.		, , ,			uga tun
	Signature, typed or printed name of registered age			gen signatura require		DATE		
12.	D OFFICERS AF	ND DIRECTORS	13. 1 1 IU		ADDITIONS/CHANGES TO OFF		DIRECTOR Thange	RS IN 12
NAME	TIDWELL, FRANK		1.2 NAN	j		L	Griange	☐ Yourgil
STREET ADDRESS	614 RED ROBIN RD.		13 STR	EET ADDRESS				
CITY-SI-ZIF TITLE	SEFFNER FL 33584	f Decem		r-\$1-7IP				
NAME		☐ DELETE	2 1 THI 2 2 NAM	1		L	Chang€	Addition 1
STREET ADDRESS				FET ADDRESS				
CHY-ST-ZIP			•	'- \$T-7IF				
TITLE		☐ DELETE	3 1 DTu	F		1	Change	☐ Addition
NAME CIUSUL ADDOSEC			3.2 NAM					
STREET ADDRESS CITY+ST+ZIP			I.	EET ADDRESS -S1-ZiP				
TITLE		DELETE	4 1 1.11			Г	7 Change	Addition
NAME			4.2 NAM	'F		-	<b>.</b>	
STREET ADDRESS			4.3 STR3	SEFACOA 13.				ſ
CITY-S1-ZIP		FIDELETE		- \$1 - ZIF				
TITLE NAME		DELETE	5 1 TUL 5 2 NAM			Ĺ	Change	Add tion
STREET ADDRESS			•	ET ADDRESS				
CITY-SI-ZIP			1	-S! ZIP				
TITLE		☐ DELETE	6 1 <b>1</b> 111			·	Change	Addition
NAME			6.2 NAM	1				
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP 14. I do hereby	certify that the information supplied	with this filing is voluntarily fur	640HY nished and do	-\$1-ZiP [ bes not qualify fo	or the exemption stated in Section 119	.07(3)(k), Fio	rida Statute	s 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 trusted 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

SIGNATURE: \_ SIGNAJURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR