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 # **P95000025445** (4)

FILED Mar 19 1996 8:00 am Secretary of State

J.D. "BUCK" INGRAM ELECTRIC COMPANY, INC.								
Principal Place	of Business	Mailing Address		······································		HIL Bail a Baila 1100 1 1 001		
APAL BALLENIA BALLE								
4591 BOHEMIA DRIVE PENSACOLA FL 32504 PENSACOLA FL 32504								
					3. Date Incorporated or Qualified 03/30/1995	3a. Date of Last	Report	
2. Principal Pla	ace of Business Election Buck Inc. Pam Co			Co. In	4. FEI Number	2(12)	Applied For	
Suite Apt	buck Ingram Co	Truck 7 (D) Dick T	-DGE	antlec	1/2 34 - 3 32	0403	Not Applicable	
22 YSQ	2 N. Davistlu	uy 27 4522 N.	Davis	Hwn	5. Certificate of Status Desired		75 Additional e Required	
City & State	sacola, Fl	28 40 050 CT	7 F	\ \	6. Election Campaign Financing	1 1	00 May Be	
Z _i p	Gountry	710 AOL VOCOL	Cour	ltrv	Trust Fund Contribution 8. This corporation has liability for	Au	ded to Fees	
4 325	03 25	29 33503	30	·· ,	Florida Statutes X Ye		\$ 199.032,	
	Name and Address of Cur	rent Registered Agent			10. Name and Address of New	Registered Agent		
				81 Name				
	M, TRACI D		}	82 Street Addr	ess (P.O. Box Number is Not Accepta	ble)		
	OHEMIA DRIVE		-		, , , , , , , , , , , , , , , , , , ,	·		
rensal	COLA FL 32504			83				
			ļ.	B4 City		85	Zip Code	
11. Pursuant to	to the provisions of Sections 607.0	502 and 607 1508. Florida Statutos	s the abov	e-named correct	ation submits this statement for the pu	FL 0	o englista i il i fe	
familiar with	th, and accept the obligations of, S	ection 607.0505, Florida Statutes.	a by the co	orporation's boar	rd of directors. I hereby accept the app	pointment as register	ed agent. I am	
12.	Signature, typed or printed name of registered a OFFICERS.	GOTE BOOTE OF APPRICABLE (NOTE	: Rogistered A	grin' signuti ire require.	ADDITIONS/CHANGES TO OF	DATE	TODO IN 10	
TITLE	D	DELETE	1.171	1E	ADDITIONS/CHANGES TO OH			
NAME	INGRAM, TRACI D		1 2 NAN	ΛE.			,	
STREET ADDRESS	4591 Bohemia Drive		1.3 STR	EFT ADDRESS				
CITY - ST - ZIP	PENSACOLA FL 32504		1.4 CIT	Y-ST-Z-P				
TITLE		☐ DELETE	2 1 TIT	LF		☐ Chang	e Addition	
NAME			2 2 NAM	15				
STREET ADDRESS			23 \$18	LET ADDRESS				
CITY - ST - ZIP TITLE		□ DELETE		r-St-ZIP				
NAME		☐ DELETE	3 1 111			Change	Addition	
STREET ADDRESS			32 NAM	l				
CITY-ST-ZIP				IEFT ADDRESS				
THTLE		☐ DELETE	4 1 III			☐ Change	Addition	
NAME		_	4.2 NAN					
STREET ADDRESS			43 SIR	EET ADDRESS				
CITY-S1-ZIP			44.011	· ST - ZIP				
TITLE		DELETE	5 1 111	.F		Change	Addition	
NAME			5 2 NAN	'E				
STREET ADDRESS			5.3 STR	EEF ADDRESS				
Crity-St-zip Title		T DELETE		-ST-ZIP				
NAME			6 1 TITI			☐ Change	Addition	
STREET ADDRESS			62 NAM	EFT ADDRESS				
CITY-ST-ZIP	1							
14. I do hereby	certify that the information supplie	d with the filing is volvetarily furnish	hed and de	-ST-ZiP Desinot qualify fo	or the exemption stated in Section 119	.07(3)(k). Florida Stat	utes I further	
certify that to eath; that t	the information indicated on this ar am an officer or director of the cor Block 12 or Block 13 Ferninged, of	nnual reod t or supplemental annual poration or the receiver or trustee of	emportis empowere	irue ano accurat	te and that my signature sha'l have the s report as required by Chapter 607, Fl	same least effect se	if made under	
SIGNATI	URE:	OH PONTED NAME OF SIGNING OFFICER	OR DIRECTO	/ R	Date	Daytime Pron	-·	