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PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED

97 JUN 27 AM 5:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000007840 (7)

1. Corporation Name

SNELGROVE ELECTRONICS INC.

Principal Place of Business

210 NW FIRST AVE.
HIGH SPRINGS FL 32643

Mailing Address

210 NW FIRST AVE.
HIGH SPRINGS FL 32643

2. Principal Place of Business

21 12818 MLK BLVD

2a. Mailing Address

26 PO Box 1513

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Alachua, FL

City & State

28 High Springs, FL

Zip

Country

24 32615

Zip

Country

29 32655

30 Alachua

9. Name and Address of Current Registered Agent

WOLFE, LARRY
200-A JOHN KNOX ROAD
TALLAHASSEE FL 32303-6643

3. Date Incorporated or Qualified

01/22/1996

3a. Date of Last Report

4. FEI Number

59-3353421

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 has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81 Name

Diana H Snelgrove

82 Street Address (P.O. Box Number is Not Acceptable)

210 NW 1st AVE

83

84 City

High Springs

FL

85 Zip Code

32643

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

Diana Snelgrove

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

6-19-97

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME SNELGROVE, WAYNE
STREET ADDRESS 210 NW FIRST AVE.
CITY-ST-ZIP HIGH SPRINGS FL 32643

TITLE D ☐ DELETE

NAME SNELGROVE, DIANA H
STREET ADDRESS 210 NW FIRST AVE.
CITY-ST-ZIP HIGH SPRINGS FL 32643

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME S/O Amanda S Payne
1.3 STREET ADDRESS 120 NW 2nd Street
1.4 CITY-ST-ZIP High Springs, FL 32643

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME Deidre S Darby
2.3 STREET ADDRESS 3385 McFarlane Ave
2.4 CITY-ST-ZIP Lake City, FL 32025

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME Charlene S Moore
3.3 STREET ADDRESS 5010 13TH AVE South
3.4 CITY-ST-ZIP Tampa, FL 33619

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME Snelgrove, Wayne
4.3 STREET ADDRESS 210 NW First AVE
4.4 CITY-ST-ZIP High Springs, FL 32643

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME Snelgrove, Diana H
5.3 STREET ADDRESS 210 NW First
5.4 CITY-ST-ZIP High Springs, FL 32643

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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 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.

SIGNATURE

Diana Snelgrove

6-3-97

(Diana H Snelgrove)

CR2E034 (9/96)