

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED  
Aug 15 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000036816 (2)

1. Corporation Name

T & M ELECTRIC OF PANAMA CITY INC.

Principal Place of Business

18912 FRONT BEACH ROAD  
PANAMA CITY FL 32413

Mailing Address

18912 FRONT BEACH ROAD  
PANAMA CITY FL 32413

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/29/1996

3a. Date of Last Report

4. FEI Number

59-3374927

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be  
Added to Fees

Trust Fund Contribution

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 3003 State Ave  
Suite, Apt. #, etc.

22 City & State

23 Panama City, Fla. 32405

24 Zip Country

25

2a. Mailing Address

26 3003 State Ave  
Suite, Apt. #, etc.

27 City & State

28 Panama City, Fla. 32405

29 Zip Country

30

9. Name and Address of Current Registered Agent

GOLDEN, LINDA P  
~~18912 FRONT BEACH ROAD~~ 3003 State Ave  
PANAMA CITY FL 32413

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL 85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD  
GOLDEN, LINDA P  
STREET ADDRESS 18912 FRONT BEACH ROAD  
CITY-ST-ZIP PANAMA CITY FL 32413

TITLE ☐ DELETE

NAME VTD  
GOLDEN, RONNIE P  
STREET ADDRESS 18912 FRONT BEACH ROAD  
CITY-ST-ZIP PANAMA CITY FL 32413

TITLE ☐ DELETE

NAME D  
MERTENS, THOMAS A  
STREET ADDRESS 168 S. SEMORAN BLVD.  
CITY-ST-ZIP ORLANDO FL

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

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

3003 State Ave  
Panama City, Fla. 32405

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3003 State Ave  
Panama City, Fla. 32405

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

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, changed, or on an attachment with an address.

CR2E034 (4/97)