## **FILED** 2003 FOR PROFIT CORPORATION Mar 17, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** P96000078419 **DOCUMENT#** 03-17-2003 90110 027 \*\*\*150.00 1. Entity Name GATOR ELECTRIC SERVICE OF SOUTH FLORIDA, INC. Mailing Address Principal Place of Business 2/0/ S. Military Type WORTH FL 33481 744 BARNETT DR., STE 14 AKE WORTH EL 33461 WEST PAlon Beh. Ft. 33415 2. Principal Place of Business CHECK HERE IF MAKING CHANGES uite, Apt, #, etc. Applied For 4. FEI Number 65-0387857 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent RILEY, ALICE Street Address (P.O. Box Number is Not Acceptable) 2101 5 Military Trail West Palm Bul, Fl. 33415 -744 BARNETT DR., STE-14> «AKE WORTH FL 33461 Zip Code reging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity submits this the obligations of registered age FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. ☐ Addition CR2E034 (10/02 ☐ Change ☐ Delete TITLE PS TITLE RILEY, ALICE NAME NAME STREET ADDRESS 13170 69TH ST. NORTH STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33412 CITY-ST-ZIP ☐ Change Addition VPT Delete TITLE TITLE NAME RILEY, BRUCE NAME STREET ADDRESS 13170 69TH ST. NORTH STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33412 CITY-ST-ZIP Change ☐ Addition TITL F □ Detete TITLE PODINEY RIED NAME RILEY, RODNEY NAME 506 HARMON STREET ADDRESS 212 NANCY RD. STREET ADDRESS CITY-ST-ZIP **PELION SC 29123** CITY-ST-ZIP

STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I 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 report or supplemental 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 of the corporation or the receiver of the corporation or the receiver of the corporation of the receiver of the corporation of the corpora of the corporation or the receiver or trustee changed, or on an attachment with an additional control of the corporation of the

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