FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000027322 (1)

JAMES	E SIMMONS ELECTRIC	CAL CONTRACTO	rs inc.					
Principal Place of Business Mailing Address						III III		
660 CARLTON ROAD 660 CARLTON ROAD								
PENSACOLA FL \$2534 PENSACOLA FL 32534								
						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 03/21/1997		
	Place of Business	2a. Mailing A	2a. Mailing Address				lied For	
21		26	-				Applicable	
Suite, Apt.		Suite, Apt	Suite, Apt. #, etc.			5. Certificate of Status Desired See Required Fee Requirements		
City & Stal	te	City & Sta	City & State			6. Election Campaign Financing \$5.00 M	lay Be	
23		28				Trust Fund Contribution Added to Fees		
Zip	Country Zip		Country			8. This corporation owes or has paid the current year Intangible		
24	25 29 9. Name and Address of Current Registered Agent			30		Personal Property Tax due June 30. Yes No		
		irrent Registered Agei	nt	81	Name	10. Name and Address of New Registered Agent		
	MMONS, JAMES E			6"	Mame			
660 CARLTON ROAD				82	Street Add	dress (P.O. Box Number is Not Acceptable)		
PENSACOLA FL 32534				83				
				84	City	■ 85 Zip Co	ode	
								
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 typed or proved name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) DATE DATE								
12.		AND DIRECTORS	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12	
TITLE	PS DELETE			1.1 TITLE		Change	Addition	
NAME	SIM MONS, JAMES E			1.2 NAME				
STREET ADDRESS	660 CARLTON ROAD		1.3 \$1		ADDRESS			
CITY-ST-ZIP	PENSACOLA FL 32534				T-21P			
TITLE			DELETE	2.1 TITLE		☐ Change	Addition	
NAME				2.2 NAME				
STREET ADORESS				23 STREET	address			
CITY-ST-ZIP				2. 4 CITY-S	ST - ZIP			
TITLE	DELETE			3.1 TITLE		☐ Change	Addition	
NAME				3.2 NAME	1		İ	
STREET ADDRESS				3.3 STREET	ADDRESS		ļ	
CITY+ST-ZIP				3.4. CITY-S	IT-21P			
TITLE			DELETE	4.1 TITLE		Change	Addition	
NAME				4. 2 NAME			}	
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP			DELETE	4.4 CITY-S1	T - ZIP		1.000	
TITLE			DELETE	5.1 TITLE		☐ Change	Addition	
NAME	\			5.2 NAME	- [ļ	
STREET ADDRESS				5.3 STREET			i	
CITY-ST-ZIP			DC) CTC	5.4 CITY - ST	I - ZIP		(A al aliai a	
TITLE			DELETE	6.1 TITLE		Change	Addition	
NAME				6.2 NAME				
STREET ADDRESS				63 STACET	AUDRESS			

14. 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 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.

4/20/00

200 - 2007

FILED

Apr 30 1998 8:00am

Secretary of State