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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000105412 (5)

GLARNER ELECTRIC, INC.

Principal Place of Business	Mailing Address	
9242 CR 635 SEBRING FL 33872	9242 CR 635 SEBRING FL 33872	

FILED Jun 04 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>12/15/1997</u> 2. Principal Place of Business 2a. Mailing Address Applied For 26 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc \$8.75 Additional Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible ☐ No 30 Personal Property Tax due June 30. 24 25 29 Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered 61 GLARNER, ROBYN L 9242 CR 635 82 Street Address (P.O. Box Number is Not Acceptable) SEBRING FL 33872 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statules, 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. It hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statules. **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) Signature, typical or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELEYE Change Addition TITLE 1.1 TITLE **GLARNER**, RANDY NAME 1.2 NAME 9242 CR 635 1.3 STREET ADDRESS STREET ADDRESS **SEBRING FL 33872** 1.4 CHY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE **GLARNER, ROBYN** 2.2 NAME NAME 9242 CR 635 STREET ADDRESS 23 STREET ADDRESS **SEBRING FL 33872** CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELFTE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I hereby certify that the informatindicated on this annual report officer or director of the corporations 12 or Block 13 of chapge. does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an element of execute this report as required by Chapter 607, Florida Statutes; and that my name appears in address