

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000105891

1. Corporation Name

H.P.S. ELECTRIC, INC.

Principal Place of Business

607 BROOKHAVEN WAY
NICEVILLE FL 32578

Mailing Address

607 BROOKHAVEN WAY
NICEVILLE FL 32578

2. Principal Place of Business

21 815 Shadow Lane

2a. Mailing Address

26 815 Shadow Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Fort Walton Beach FL

City & State

28 Fort Walton Beach FL

Zip Country

24 32547 25

Zip Country

29 32547 30

9. Name and Address of Current Registered Agent

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134

3. Date Incorporated or Qualified

01/02/1998

4. FEI Number

59-3481795

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 the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

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

Johnny L. Parker sec/TREAS

3-14-99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD
HERRIN, ROBERT A
STREET ADDRESS 607 BROOKHAVEN WAY
CITY-ST-ZIP NICEVILLE FL 32578

TITLE ☐ DELETE

NAME VD
STUCKEY, ARTHUR L
STREET ADDRESS 607 BROOKHAVEN WAY
CITY-ST-ZIP NICEVILLE FL 32578

TITLE ☐ DELETE

NAME STD
PARKER, JOHNNY L
STREET ADDRESS 607 BROOKHAVEN WAY
CITY-ST-ZIP NICEVILLE FL 32578

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 4360 Cooper Lane
1.4 CITY-ST-ZIP Holt FL 32564

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 4825 Chapparral Street
2.4 CITY-ST-ZIP Crestview FL 32539

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS P O Box 63
3.4 CITY-ST-ZIP Holt FL 32564

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 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, with all other like empowered.

SIGNATURE: *Johnny L. Parker* sec/TREAS 3-14-99 850-864-1369

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

FILED
Mar 16, 1999 8:00 am
Secretary of State

03-16-1999 90151 032 ***150.00



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