## 2001 UNIFORM BUSINESS REPORT (UBR)

## **FILED** May 01, 2001 8:00 am Secretary of State DOCUMENT # **P98000050895** CUSTOMERS CHOICE PEST CONTROL A GOLD STAR SERVIC 05-01-2001 90026 006 \*\*\*150.00 Principal Place of Business Mailing Address 310 W MAGNOLIA STREET 310 W MAGNOLIA STREET LEESBURG FL 34748 LEESBURG FL 34748 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3515085 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HICKS, C.L. Street Address (P.O. Box Number is Not Acceptable) 310 W MAGNOLIA STREET LEESBURG FL 34748 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12 **PSTD** TITLE ☐ Delete TITLE ☐ Change Addition HICKS, C. L. NAME NAME STREET ADDRESS STREET ADDRESS 310 W. MAGNOLIA ST CITY - ST - ZIP CITY-ST-ZIP LEESBURG FL 34748 ☐ Delete TETLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Adeltion NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete 11113 Chance ☐ Addition STREET ADDRESS STREET ADDRESS CITY-\$1-ZIP CITY-ST-Z'P ☐ Delate THE ☐ Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. Thereby 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 if

C.L. Hicks

4/25/01

changed, or on an attachment with anyaddress, with all other like empowered

SISNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

CR2E034 (10/00)



AHackment 964096 # P98000050895

## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 1, 2000

NICHOLAS T. SCHROEDER, ESQ 4010-D NEWBERRY ROAD GAINESVILLE, FL 32607

Re: Document Number P98000050895

The Articles of Amendment to the Articles of Incorporation of CUSTOMERS CHOICE PEST CONTROL A GOLD STAR SERVICE AWARD COMPANY which changed its name to CENTRAL STATE CONTRACT ELECTRICAL, INC., a Florida corporation, were filed on November 27, 2000.

Should you have any questions regarding this matter, please telephone (850) 487-6050, the Amendment Filing Section.

Letter Number: 100A00061147

Kimberly Rolfe Corporate Specialist Supervisor Division of Corporations

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314