2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 12, 2001 8:00 am Secretary of State DOCUMENT # P98000068441 • ... 1. Entity Name TIB'S ELECTRICAL CONTRACTORS, INC. -12-2001 90039 022 ***150.00 Principal Place of Business Mailing Address 3585 N. COURTENAY PARKWAY.. #3 3585 N. COURTENAY PARKWAY., #3 MERRITT ISLAND FL 32953 MERRITT ISLAND FL 32953 762168 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 59-3526232 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 THIBIDEAU, JOSEPH JR. Street Address (P.O. Box Number is Not Acceptable) 7 INDIAN ST. MERRITT ISLAND FL 32952 City Zip Code FL 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) П Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIT! F Delete TITLE ☐ Change ☐ Addition NAME Kennedy-Thibideau. Phyllis NAME STREET ADDRESS 7 INDIAN ST. STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MERRITT ISLAND FL 32952 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME THIBIDEAU, REYNOLD J SR. NAME STREET ADDRESS 7 INDIAN ST. STREET ADDRESS CITY-ST-ZIP **MERRITT ISLAND FL 32952** CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME THIBIDEAU, REYNOLD J JR. NAME STREET ADDRESS 7 INDIAN ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MERRITT ISLAND FL 32952 ☐ Delete TITLE Change ☐ Addition NAME LAMONTAGNE, PAUL NAME STREET ADDRESS STREET ADDRESS 7 INDIAN ST. CITY-ST-ZIP CITY-ST-ZIP MERRITT ISLAND FL 32952 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME

13. 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address othe ke empowered.

STREET ADDRESS CITY-ST-ZiP

SIGNATURE: \

STREET ADDRESS

TURE AND TYPED OR PRINTED NAME OF SIGNING O

JOSEPH THIBIDERU JE