

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 29, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000080799

1. Entity Name
SCOTT FULLER ELECTRIC CO., INC.



Principal Place of Business
2132 NE 25TH STREET
WILTON MANORS, FL 33305

Mailing Address
2132 NE 25TH STREET
WILTON MANORS, FL 33305



04212004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0863122	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

FULLER, SCOTT R
2132 NE 25TH STREET
WILTON MANORS, FL 33305

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

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
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	FULLER, SCOTT R
STREET ADDRESS	2132 NE 25TH ST.
CITY-ST-ZIP	WILTON MANORS, FL 33305
TITLE	VP
NAME	FULLER, ROBERT A
STREET ADDRESS	2132 NE 25TH ST.
CITY-ST-ZIP	WILTON MANORS, FL 33305
TITLE	VP
NAME	BRUNTTI-FULLER, CAROLYN C
STREET ADDRESS	2132 NE 25TH STREET
CITY-ST-ZIP	WILTON MANORS, FL 33305
TITLE	ST
NAME	BRUNETTI, BENNETT E
STREET ADDRESS	1824 SE 21ST AVE.
CITY-ST-ZIP	FT. LAUDERDALE, FL 33316
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

B. E. Brunetti
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

B. E. Brunetti (ST)

DATE

Daytime Phone #

4/27/04 954.524.6270