FILED 2000 UNIFORM BUSINESS REPORT (UBR) Apr 21, 2000 8:00 am Secretary of State DOCUMENT # **P99000032706** 1. Entity Name 04-21-2000 90164 043 ***150 00 HERITAGE ELECTRICAL COMPANY, INC. Principal Place of Business Mailing Address 17830 FRONT STREET 17830 FRONT STREET DACORAL MT. DORA FL 32757-9787 MT. DORA FL 32757 2. Principal Place of Business 3. Mailing Address 2933 Lower Union Hill Rdc/o Mario A. Garcia, Esq Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 315 E. Robinson_St.-#160 City & State Orlando, 4. FEI Number Applied For City & State ${ m FL}$ 59~3569932 Canton, GA Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 30115 32801 Orange Fee Required <u>Cherokee</u> 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name <u>Mario A. Garcia, Esq.</u> PAPPAS, PETER C Street Address (P.O. Box Number is Not Acceptable) 315 E. Robinson Street -#160 225 EAST ROBINSON STREET SUITE 540 ORLANDO FL 32801 Zip Code 32801 Orlando ed office or registered agent, or both, in the State of Florida The above named entity submits is SIGNATURE . 10 (De Stered Agent signature required when reinstating) Signature, typed or printed name 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, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. S/T/D Addition TITLE ☐ Delete BROWN, WILLIAM P NAME William P. Brown STREET ADDRESS 17830 FRONT STREET STREET ADDRESS P. O. Box 1018 CITY-ST-ZIP CITY-ST-ZIP MT. DORA FL 32757 Zellwood, FL 32798-1018 TITLE ☐ Change Addition TITLE Delete FISHER, RON NAME NAME STREET ADDRESS STREET ADDRESS 134 GROVE PARK CITY-ST-ZIE CITY-ST-ZIP WOODSTOCK GA 30138 ☐ Addition TITLE TITLE ☐ Delete Vice-Pres./Director **BROWN, PATRICK W** NAME NAME Patrick W. Brown 235 HEDGE ROW HOLLOW STREET ADDRESS STREET ADDRESS 235 Hedge Row Hollow Roswell, GA 30076 CITY-ST-ZIP CITY-ST-ZIP ROSEWELL GA 30076 Addition ☐ Delete TITLE TITLE President/Director DANIELS, CHUCK NAME Charles Daniels **5229 CAMDEN LAKE PARKWAY** STREET ADDRESS STREET ADDRESS 5229 Camden Lake Parkway Acworth, GA 30101 CITY-ST-ZIP CITY-ST-ZIP ACWORTH GA 30101 ☐ Change Addition A Director ☐ Delete TITLE Keith A. Daniels NAME STREET ADDRESS STREET ADDRESS 212 Coleman's Bluff Drive CITY-ST-ZIP Acworth, GA 30101 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE

13. I hereby certify that the information supplied with this filing poes 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, with all other like empowered.

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

NAME STREET ADDRESS

CITY-ST-ZIE

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(352)735-727