2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2000 8:00 am
Secretary of State
05-19-2000 90099 040 ***158.75

DOCUMENT # P99000094094

1. Entity Name

EMERALD COAST ELECTRIC INC.

Principal Place of Business	Mailing Address
809 FLORIDA AVE STE B LYNN HAVEN FL 32444	P O BOX 1446 LYNN HAVEN FL 32444-6246

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
809 B	P.O. Box 1446
Suite, Apt. #, etc. FLORIDA AV	Suite, Apt. #, etc. 809 B FLORIDA AV
City & State LYNN HAVEN FL	City & State LYNN HAVEN FL
Zip 32444 Country USA	Zip 32444 Country USA

4. FEI Number 59-3605790 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
R.L. WILLIAMSON JR 809 B FLORIDA AV LYNN HAVEN FL 32444	Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 R L Williamson JR
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Date

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS	12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP
Chairman of The Board R.L. WILLIAMSON JR 809 B FLORIDA AV LYNN HAVEN FL 32444 ☐ Delete	☐ Change ☐ Addition
V. Kenneth Hobbs President P.O. Box 1446 LYNN HAVEN FL 32444 ☐ Delete	☐ Change ☐ Addition
V. President/Secretary K. Scott-Hobbs P.O. Box 1446 LYNN HAVEN FL 32444 ☐ Delete	☐ Change ☐ Addition
☐ Delete	☐ Change ☐ Addition
☐ Delete	☐ Change ☐ Addition
☐ Delete	☐ Change ☐ Addition

CR2E014 (10/99)

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, with all other like empowered.

SIGNATURE: R L Williamson JR Chairman of the Board 04/26/00 (850) 235-8859
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #