

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **S44054** (2)

1. Corporation Name

**ADVANCED ELECTRONICS OF MIDDLEBURG, INC.**



Principal Place of Business

**2620 BLANDING BLDG  
STE 155  
MIDDLEBURG FL 32068  
US**

Mailing Address

**P.O. BOX 1078  
MIDDLEBURG FL 32060  
US**

3. Date Incorporated or Qualified  
**04/08/1991**

3a. Date of Last Report  
**07/10/1995**

2. Principal Place of Business

2a. Mailing Address

21 **2620 Blanding Blvd.**

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **Suite #9**

27

City & State

City & State

23 **Middleburg, FL**

28

Zip

Country

Zip

Country

24 **32068**

25

29

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4. FEI Number  
**59-3067985**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under s. 193.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**EDWARDS, WILLIAM THOMAS, JR.  
2554 BLANDING BLVD.  
SUITE B  
MIDDLEBURG FL 32068**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and state if applicable

(NOTE: Registered Agent Signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
	<b>D GRUBB, GLENN G.</b>	<b>2870 CREEK ST.</b>	<b>MIDDLEBURG FL</b>	<input type="checkbox"/>
	<b>D GRUBB, LINDA L.</b>	<b>2870 CREEK ST.</b>	<b>MIDDLEBURG FL</b>	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
		<b>3184 Rideout Lane</b>	<b>Middleburg, FL 32068</b>	<input checked="" type="checkbox"/>
		<b>3184 Rideout Lane</b>	<b>Middleburg, FL 32068</b>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

*Linda Grubb*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**6/7/96** (904) 282-0001  
Date Date of Filing

CR2E034 (12/95)