FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY -1 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S81843** **(2)**

1. Corporation Name
WALLIS ELECTRIC MOTOR SERVICE INC.

Principal Place of Business	Mailing Address
2650-7 ROSSELLE STREET JACKSONVILLE FL 32204	2650-7 ROSSELLE STREET JACKSONVILLE FL 32204

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **09/20/1991**
3a. Date of Last Report: **03/22/1994**

2. Principal Place of Business
21: 2650-7 Rosselle St
22 Suite, Apt. #, etc.: # 7
23 City & State: JAX, FL.
24 Zip: 32204 25 County: Duval

2a. Mailing Address
26: P.O. Box 9546
27 Suite, Apt. #, etc.:
28 City & State: JAX, FL
29 Zip: 32208 30 County: Duval

4. FEI Number: **59-3074145** ☐ 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 been in existence for over 5 years
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

WALLIS, JANET M
2650-7 ROSSELLE STREET
JACKSONVILLE FL 32204

10. Name and Address of New Registered Agent

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 Section(s) 607.0505 and 607.0506, 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: Janet Wallis 4-27-95
(Date)

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '95
01 D 02 NAME: WALLIS, JANET M 03 STREET ADDRESS: 1820 LOYOLA DR. N. 04 CITY ST ZIP: JACKSONVILLE FL	☐ Change ☐ Addition
01 02 NAME 03 STREET ADDRESS 04 CITY ST ZIP	☐ Change ☐ Addition
01 02 NAME 03 STREET ADDRESS 04 CITY ST ZIP	☐ Change ☐ Addition
01 02 NAME 03 STREET ADDRESS 04 CITY ST ZIP	☐ Change ☐ Addition
01 02 NAME 03 STREET ADDRESS 04 CITY ST ZIP	☐ Change ☐ Addition
01 02 NAME 03 STREET ADDRESS 04 CITY ST ZIP	☐ Change ☐ Addition

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)(i), 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: Janet Wallis Janet Wallis 4-14-95 904-388-7725
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Telephone Number)

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