

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **V22912** (2)
1. Corporation Name
HANK LOWRY ELECTRIC, INC.

Principal Place of Business
**930 THORPE RD.
ORLANDO FL 32824**

Mailing Address
**930 THORPE RD.
ORLANDO FL 32824**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/19/1992	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3141121	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

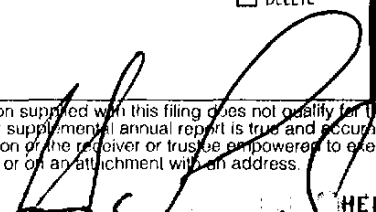
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
LOWRY, HENRY C JR. 930 THORPE RD. ORLANDO FL 32824		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	FL
		85 Zip Code	

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 _____
(NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	
NAME	LOWRY, HENRY C JR.	1.2 NAME	
STREET ADDRESS	930 THORPE RD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32824	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	
NAME	LOWRY, HENRY C	2.2 NAME	
STREET ADDRESS	36 W. ILLIANA ST.	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32806	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	
NAME	LOWRY, H. CHINL	3.2 NAME	LOWRY, H. CHING
STREET ADDRESS	930 THORPE RD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32824	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	Vice President Construction
NAME	SIBLEY, SALLY	4.2 NAME	SPICKARD, ROBERT L.
STREET ADDRESS	129 CHICAGO WOODS CIRCLE	4.3 STREET ADDRESS	228 BAYHEAD DRIVE
CITY-ST-ZIP	WINDERMERE FL 34786	4.4 CITY-ST-ZIP	KISSIMMEE, FL 34743
TITLE	AS	5.1 TITLE	
NAME	PROTASEVICH, EMIL	5.2 NAME	
STREET ADDRESS	7766 SILVERTREE TR #204	5.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32822	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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:  **HENRY C. LOWRY, JR. / President** 2/28/98 407.855.0035

CR2E034 (10/97)