

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2002 8:00 am
Secretary of State
 02-07-2002 90019 014 ***150.00

0046714
 AV

DOCUMENT # V67397

1. Entity Name
TELECO ELECTRICAL, INC.

Principal Place of Business

24 HARRISON AVENUE
PANAMA CITY FL 32401

Mailing Address

24 HARRISON AVENUE
PANAMA CITY FL 32401

2. Principal Place of Business

475 HARRISON AVE.

3. Mailing Address

475 HARRISON AVE.

Suite, Apt. #, etc.

SUITE 203-D

Suite, Apt. #, etc.

SUITE 203-D

City & State

PANAMA CITY, FL

City & State

PANAMA CITY, FL

Zip

32401

County

Bay

Zip

32401

County

Bay



DO NOT WRITE IN THIS SPACE

4. FEI Number

58-2015688

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CAIN, NORMAN
24 HARRISON AVE.
PANAMA CITY FL 32401

7. Name and Address of New Registered Agent

Name

RODNEY FAIRCLOTH

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

475 HARRISON AVE.

SUITE 203-D

City

PANAMA CITY, FL

Zip Code

32401

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

Rodney Faircloth

RODNEY FAIRCLOTH, PRES.

1-13-02

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

(NOTE: Registered Agent signature required when reissuing)

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, 2002 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

TITLE	D	<input type="checkbox"/> Delete
NAME	FAIRCLOTH, RODNEY E.	
STREET ADDRESS	1893 LAKEWOOD DR.	
CITY-ST-ZIP	CAIRO GA	
TITLE	D	<input type="checkbox"/> Delete
NAME	FAIRCLOTH, PATRICIA D.	
STREET ADDRESS	1893 LAKEWOOD DR.	
CITY-ST-ZIP	CAIRO GA	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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:

Rodney Faircloth
RODNEY FAIRCLOTH

1-13-02

850-785-2449

Date

Daytime Phone #

CR2E034 (9/01)