Entity Name: TRI-CITY ELECTRICAL CONTRACTORS, INC.		Secretary of State 5098198696CC		
Current Prir	ncipal Place of Business:		20391390	9000
430 WEST DRI				
ALTAMONTE S	PRINGS, FL 32714			
Current Mai	ling Address:			
430 WEST D ALTAMONT	DRIVE E SPRINGS, FL 32714			
FEI Number: 02-0657423 Certificate of Status			Certificate of Status Desire	d: Yes
Name and Address of Current Registered Agent:				
CORPORATION COMPANY OF ORLANDO 300 SOUTH ORANGE AVENUE SUITE 1600 ORLANDO, FL 32801 US				
ORLANDO, FL	32801 05			
,	d entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the State of Florida	а.
The above named		Ū		a.)2/03/2021
The above named	d entity submits this statement for the purpose of changing its regis	Ū		
The above named	d entity submits this statement for the purpose of changing its regis E: J. GREGORY HUMPHRIES, VICE PRESID Electronic Signature of Registered Agent	Ū		2/03/2021
The above named	d entity submits this statement for the purpose of changing its regis E: J. GREGORY HUMPHRIES, VICE PRESID Electronic Signature of Registered Agent	Ū.		2/03/2021
The above named SIGNATURE Officer/Dire	d entity submits this statement for the purpose of changing its regis E: J. GREGORY HUMPHRIES, VICE PRESID Electronic Signature of Registered Agent ctor Detail :	ENT	C	2/03/2021
The above named SIGNATURE Officer/Dire Title	d entity submits this statement for the purpose of changing its regis E: J. GREGORY HUMPHRIES, VICE PRESID Electronic Signature of Registered Agent Ctor Detail : DP	ENT	DS	2/03/2021
The above named SIGNATURE Officer/Dire Title Name Address	d entity submits this statement for the purpose of changing its regis E: J. GREGORY HUMPHRIES, VICE PRESID Electronic Signature of Registered Agent ctor Detail : DP OLMSTEAD, JACK A.	Title Name Address	DS BORDERICK, F. RANCE	02/03/2021 Date
The above named SIGNATURE Officer/Dire Title Name Address	d entity submits this statement for the purpose of changing its regis E: J. GREGORY HUMPHRIES, VICE PRESID Electronic Signature of Registered Agent Ctor Detail : DP OLMSTEAD, JACK A. 430 WEST DRIVE	Title Name Address	DS BORDERICK, F. RANCE 430 WEST DRIVE	02/03/2021 Date
The above named SIGNATURE Officer/Dire Title Name Address City-State-Zip:	d entity submits this statement for the purpose of changing its regis E. J. GREGORY HUMPHRIES, VICE PRESID Electronic Signature of Registered Agent Ctor Detail : DP OLMSTEAD, JACK A. 430 WEST DRIVE ALTAMONTE SPRINGS FL 32714	Title Name Address City-State-Zip:	DS BORDERICK, F. RANCE 430 WEST DRIVE ALTAMONTE SPRINGS FL 32714	02/03/2021 Date
The above named SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title	d entity submits this statement for the purpose of changing its regis E: J. GREGORY HUMPHRIES, VICE PRESID Electronic Signature of Registered Agent Ctor Detail : DP OLMSTEAD, JACK A. 430 WEST DRIVE ALTAMONTE SPRINGS FL 32714 CV	Title Name Address City-State-Zip: Title	DS BORDERICK, F. RANCE 430 WEST DRIVE ALTAMONTE SPRINGS FL 32714 AS	02/03/2021 Date

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000129462

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

Title

Name

Address

City-State-Zip:

SIGNATURE: JACK A. OLMSTEAD

CFO, T

D

GERMANA, MICHAEL

PEREZ, NOIRE ENREQUE

430 WEST DRIVE

City-State-Zip: ALTAMONTE SPRINGS FL 32714

430 WEST DRIVE City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title

Title

Name

Address

Name

Address

PRESIDENT

D

JANESKI, CLYDE L.

ALTAMONTE SPRINGS FL 32714

430 WEST DRIVE

02/03/2021

FILED Feb 03, 2021

Electronic Signature of Signing Officer/Director Detail

Date