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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **F56075**

1. Corporation Name

EAGLE ELECTRIC OF CENTRAL FLORIDA, INC.

Principal Place	e of Business	Mailing Addres					<b>81(88</b> 148) <b>8</b> 311 <b>8 6</b> 1(1) <b>83</b> 1(1) 1	NET BILL GIGHT BY	E() DIDII DIBIE	###(  <b>                                 </b>	
213 WGTO TOWER ROAD		<del>-</del>	213 WGTO TOWER ROAD								
PO BOX 715		PO BOX 715					DO NOT WRITE IN THIS SPACE				
LAKE ALFRED FL 33850 LAK		LAKE ALFRED	AKE ALFRED FL 33850			2 Poto Inc	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed				
						11/24/					
2. Principal P	lace of Business	2a. Mailing Ad	dress			4. FEI Nun			A	plied For	
21		26				59-21	54990	·		t Applicable	
Suite, Apt.	#, etc.	Suite, Apt.	#, etc.			5. Certifcat	te of Status Desired		,	Additional equired	
City & Stat	to .	City & Stat	te			6 Flection	Campaign Financing	s -		May Be	
23		28	-		_	l l	und Contribution			to Fees	
Zip	Country	Zip		Country		8. This cor	poration owes the cur	rent year Inta		_	
24	25	29	30	0			al Property Tax.		Yes	No	
	9. Name and Address of Curr	ent Registered Agen	<u>ıt                                      </u>	1041		10. Name a	and Address of New	Registered A	\gent		
DEV.	ves, c richard Jr			81	Name	•	e .		•	.	
	WGTO TW RD			82	Street A	ddress (P.O. Box I	Number is Not Accept	table)		- <del> </del>	
	ALFRED, FL			83			· · ·				
3385	50										
				84	City			FL	85 Zip	Code	
11 Pursuant	to the provisions of Sections 607.0	502 and 607,1508, Flo	orida Statutes.	the above	-named co	orporation submits	s this statement for the	purpose of o	changing its	registered	
office or r	to the provisions of Sections 607.0 egistered agent, or both, in the Star	te of Florida. Such cha	ange was auth	iorized by i	the corpor	orporation submits ation's board of di	s this statement for the rectors. I hereby acce	purpose of cept the appoin	changing its itment as re	registered gistered	
office or r agent. I a	to the provisions of Sections 607.0 registered agent, or both, in the Starm familiar with, and accept the obli	te of Florida. Such cha	ange was auth	iorized by i	the corpor	orporation submits ation's board of di	s this statement for the rectors. I hereby acce	purpose of c pt the appoin	changing its itment as re	registered egistered	
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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 chapter of on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

OFFICER OR DIRECTOR

February 15, 1998 (941) 956-1424

Daytime Phone #