2001 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 24, 2001 8:00 am Secretary of State **DOCUMENT # 305550** 1. Entity Name SPARTON ELECTRONICS FLORIDA, INC. 01-24-2001 90032 030 ***150.00 Principal Place of Business Mailing Address C/O RICHARD LANGLEY C/O RICHARD LANGLEY 2400 EAST GANSON STREET 2400 EAST GANSON STREET посовобі JACKSON MI 49202 JACKSON MI 49202 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1151346 Not Applicable Zíp Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6.- Name and Address of Current Registered Agent-7. Name and Address of New Registered Agent ----Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition Change TITLE Delete President SMITH, JOHN J NAME NAME David W. Hockenbrocht STREET ADDRESS 2400 E. GANSON ST. STREET ADDRESS 2400 E Ganson St., Jackson MI 49202 CITY-ST-ZIP CITY-ST-ZIP JACKSON MI ☐ Change ☐ Delete TITLE ☐ Addition TITLE JOHNSON, DOUGLAS E NAME NAME 2400 E. GANSON ST. STREET ADDRESS STREET ADDRESS CITY-ST-7IP JACKSON MI CITY-ST-ZIP Change ☐ Addition TITLE Delete TITLE LANGLEY, RICHARD L. NAME NAME 2400 EAST GANSON STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP JACKSON MI Change ☐ Addition ☐ Delete TITLE TITLE LANGLEY, RICHARD L. NAME NAME 2400 EAST GANSON STREET STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP JACKSON MI ☐ Change ☐ Addition TITLE ☐ Delete TITLE APPEL, R. JAN NAME NAME 2400 EAST GANSON STREET STREET ADDRESS STREET ADDRESS JACKSON MI CITY-ST-7IP CITY-ST-ZIP ☐ Change [Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

I hereby certify that the information supplied with this filling 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: