2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

822718 **DOCUMENT #**

1. Entity Name

PATRICK INDUSTRIES, INC.



FILED Apr 07, 2003 8:00 am Secretary of State 04-07-2003 90181 013 ***150.00

l	0666979
	≥

,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
Principal Place of Business Mailing Address P O BOX 638 P O BOX 638 1800 S. 14TH ST. 1800 S. 14TH ST. ELKHART IN 46516-2275 ELKHART IN 46516-2275								
2. Principal F	Place of Business	3. Mailing Address				#1011 01011 01011 0 1	(1)	
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING	G CHANGES		
City & State City & State		<u> </u>	35-115//45		plied For t Applicable			
Zip	Country	Zip	Country		5. Certificate of Status Desired	\$8.75 Addi	itional	
	6. Name and Address of Currer	nt Registered Agent			7. Name and Address of New Registered			
	شيمس دو رويديميوس الاستشهام د		Nai	me				
C T COR	PORATION SYSTEM		<u> </u>	Street Address (P.O. Box Number is Not Acceptable)				
1200 SOL	JTH PINE ISLAND ROAD		Oile					
PLANTAT	ION FL 33324					_		
			City	y	FL	Zip Code	,	
	e named entity submits this statement tions of registered agent.	for the purpose of changing	its registered office	ce or registere	ed agent, or both, in the State of Florida. I am	familiar with, a	and accept	
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (Ne	OTE: Registered Agent	signature required	when reinstating) DATE			
<u> </u>								
1. After	ILE NOW!!! FEE IS \$150.00 The May 1, 2003 Fee will be \$550.00 Repartment of the Payable to Florida Department of the Pay				Election Campaign Financing Trust Fund Contribution.		May Be to Fees	
10.	OFFICERS AND		11.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS	IN 11	
TITLE	VD	Delete	TITLE	SEC	RETARY- TREASURER	Change	Addition 8	
NAME	KANKEI KEITH V		MAME	20	DY L. NEMETH	onlings	<u> </u>	
STREET ADDRESS	1800 SOUTH 14TH 80	AND OF DIRECTORS		ESS IP	nn 50.14th 57.			
CITY-ST-ZIP	ELKHART IN 46516-2275	NO LONGER OFFICE	CITY-ST-ZIP	<i></i>	IKHART IN 46516			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUNG, DOROTHY M 1334 W WOLF AVE ELKHART IN	⊠ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	D-C MER 180	CHAIRMAN EMERITUS LVIN D. LUNG 00 SO. 14TH ST. LKHART, IN 46516	☐ Change	⊠ Addition	
TITLE NAME	D TIMMINS, ROBERT C	☐ Delete	TITLE NAME	Δ		Change	Addition	
STREET ADDRESS CITY-ST-ZIP	611 EISENHAUER GRAND JUNCTION CO		STREET ADDR	ESS 180	RANCE BRENNAN 00 SO. 14TH ST KHART, IN 46516			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WYLAND, HAROLD E 1800 SOUTH 14TH ELKHART IN	☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	ESS 18	ALTER E, WELLS OD SO. 14TH ST OKHART IN 46516	☐ Change	Addition	
TITLE NAME STREET ADDRESS	D MCDERMOTT, JOHN 1800 S 14TH STREET	☐ Delete	TITLE NAME STREET ADDR	D	RY RENBARGER.	☐ Change	Addition	
CITY-ST-ZIP	ELKHART, IND 0		CITY-ST-ZIP		LKHART, IN 46516			
TITLE NAME	PD LUNG, DAVID D.	☐ Delete	TITLE NAME			☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP	1800 S. 14TH ST. ELKHART IN		STREET ADDRI	ESS				
48 11	and the state of t							

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE ASSOCIATION OF SIGNING OFFICER OR DIRECTOR