2002 UNIFORM BUSINESS REPORT (UBR)

Jan 29, 2002 8:00 am F01000004745 Secretary of State DOCUMENT # 1. Entity Name 01-29-2002 90066 021 ***150.00 WHEELER BROS., INC. Mailing Address Principal Place of Business P.O. BOX 737 384 DRUM AVE. SOMERSET PA 15501 SOMERSET PA 15501 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 25-1089278 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD **PLANTATION FL 33324** Zip Code City FL 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change **X**X Addition Vice President TITLE TITLE PD ☐ Delete NAME NAME WHEELER, HW JR. Paul Wheeler STREET ADDRESS STREET ADDRESS 384 DRUM AVE. 384 Drum AVe. CITY-ST-ZIP SOMERSET PA 15501 CITY-ST-ZIP Somerset, PA 15501 本本 Addition Change ☐ Delete TITLE Assistant Sec.-Treasurer TITLE **VD** NAME C. James Jorgensen NAME WHEELER, JOAN STREET ADDRESS STREET ADDRESS 384 DRUM AVE. 384 Drum Ave. CITY-ST-ZIP CITY-ST-ZIP SOMERSET PA 15501 Somerset, PA 15501 . 🔄 Change — 🐼 Addition TITLE Vice-President --Delete : NAME Charles Thompson NAME WHEELER, DAVID STREET ADDRESS 384 Drum Ave. STREET ADDRESS 384 DRUM AVE. CITY-ST-7IP CITY-ST-ZIP Somerset, PA SOMERSET PA 15501 ☐ Change ☐ Addition ☐ Delete TITLE TITLE **VD** NAME WHEELER, HW III STREET ADDRESS STREET ADDRESS 384 DRUM AVE. CITY-ST-ZIP CITY-ST-ZIP SOMERSET PA 15501 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME DAVIES, BARBARA NAME STREET ADDRESS 384 DRUM AVE. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SOMERSET PA 15501 Change ☐ Addition ☐ Delete TITLE TITLE DAVIES, RANDY NAME NAME STREET ADDRESS 384 DRUM AVE. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SOMERSET PA 15501

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 received 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

UPE PEQUINAN Jorgensen SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/02

814-443-7000

FILED