7/31

FILED
Sep 12, 2001 8:00 am
Secretary of State
07-31-2001 90239 042 ***550.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000106115

1. Entity Name
SNAVELY FOREST PRODUCTS (FL) CO.

Principal Place of Business	Mailing Address
5550-C AIRPORT BLVD TAMPA FL 33634	5550-C AIRPORT BLVD TAMPA FL 33634

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
5300 RECKER HIGHWAY	5300 RECKER HIGHWAY
Suite, Apt. #, etc. BLDG # 11	Suite, Apt. #, etc. BLDG # 11
City & State WINTER HAVEN FLORIDA	City & State WINTERHAVEN FLORIDA
Zip 33880 Country	Zip 33880 Country

4. FEI Number 59-3281836 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
STOCKHAUSEN, JOHN A 5550-C AIRPORT BLVD TAMPA FL 33634	Name DAVID HURLESS Street Address (P.O. Box Number is Not Acceptable) 5300 RECKER HIGHWAY BLDG # 11 City WINTERHAVEN FL Zip Code 33880

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 _____ JOHN STOCKHAUSEN 7/22/01 David M. Hurless 8-31-01
Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐	FILE NOW!!! FEE IS $550.00 After September 12, 2001 Fee will be $750.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PRES NAME STREET ADDRESS CITY-ST-ZIP	D SNAVELY, STEPHEN V 600 DELWAR ROAD PITTSBURGH PA 15236	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE VP NAME STREET ADDRESS CITY-ST-ZIP	D FITZSIMMONS, SUSAN S 600 DELWAR ROAD PITTSBURGH PA 15236	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE CFO NAME STREET ADDRESS CITY-ST-ZIP	JOHN STOCKHAUSEN 600 DELWAR ROAD PITTSBURGH PA 1536	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE CHAIR NAME STREET ADDRESS CITY-ST-ZIP	C.M. SNAVELY 600 DELWAR RD PITSBURGH PA 15236	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (5/01)

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 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: SECRETARY 7/31/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #