2001 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 24, 2001 8:00 am DOCUMENT # 262042 **Secretary of State** 1. Entity Name WEST COAST STEEL ERECTORS, INC. 01-24-2001 90040 027 ***150.00 Principal Place of Business Mailing Address 19273 BLOUNT RD PO BOX 16578 LUTZ FL 33549 TAMPA FLA 33687-3578 HS 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-0976837 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name STANSEL, EDWARD L. Street Address (P.O. Box Number is Not Acceptable) 19273 BLOUNT ROAD **LUTZ FL 33549** Zip Code 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 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 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS ☐ Change PD ☐ Addition TITLE ☐ Delete TITLE NAME STANSEL, EDWARD L. NAME STREET ADDRESS STREET ADDRESS 19273 BLOUNT ROAD CITY-ST-ZIP CITY-ST-ZIP LUTZ FL ☐ Change ☐ Addition ☐ Delete TITLE **VDS** TITLE NAME NORRIS, BETTY JO NAME STREET ADDRESS STREET ADDRESS 5501 PURITAN ROAD CITY-ST-7IP CITY-ST-ZIP TAMPA FL ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME KELLY, RONALD STREET ADDRESS STREET ADDRESS 1211 LAKE CHARLES CIR CITY-ST-ZIP CITY-ST-ZIP LUTZ FL_{-} Delete ■ Addition STANSEL, DENNIS EDWARD 904 STRATFORD MANOR DR. TITLE TITLE NAME STANSEL, DENNIS EDWARD NAME STREET ADDRESS STREET ADDRESS 4716 PRESIDENTIAL ST CITY-ST-ZIP BRANDON, FL 33510 CITY-ST-ZIP SEFFNER FL ☐ Addition TITLE □ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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.

SIGNING OFFICER OR DIRECTOR