FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 22 AM 11:01

DOCUMENT # 289773 (4)

1. Corporation Name
PRIDE MANUFACTURING COMPANY

Principal Place of Business	Mailing Address
RR 3 BOX 6 GUILFORD ME 04443 US	211 PRIDE ROAD TAMPA FL 33619

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 02/11/1965	3a. Date of Last Report: 05/01/1994
4. FEI Number: 01-0273199	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

GARDNER, MERRITT A.
2700 BARNETT PLAZA
101 EAST KENNEDY BLVD.
TAMPA FL 33602

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number is Not Acceptable): 501 East Kennedy Boulevard
33: Suite 1250
34 City: FL 35 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	V/D	☐ Change ☒ Addition
NAME	PRIDE, STANLEY G.	1.2 NAME	Ellis, William R.	
STREET ADDRESS	2405 ARDSON PL N 904A	1.3 STREET ADDRESS	1400 N. Walker	
CITY-ST-ZIP	TAMPA FL	1.4 CITY-ST-ZIP	Iron Mountain, MI 49801	
TITLE	SD	2.1 TITLE	T/D	☐ Change ☒ Addition
NAME	ELLIS, ARIEL W	2.2 NAME	Hewett, Vandy E.	
STREET ADDRESS	3450 W PEBBLE BEACH CT	2.3 STREET ADDRESS	Dover Road	
CITY-ST-ZIP	LECANTO FL	2.4 CITY-ST-ZIP	Milo, ME 04463	
TITLE	PD	3.1 TITLE	D	☐ Change ☒ Addition
NAME	PRIDE, ROBERT B	3.2 NAME	Hawkes, David	
STREET ADDRESS	258 PINE STREET	3.3 STREET ADDRESS	482 Congress St. Suite 4000	
CITY-ST-ZIP	DOVER-FOXCROFT ME	3.4 CITY-ST-ZIP	Portland, ME 04101	
TITLE	V	4.1 TITLE		☐ Change ☐ Addition
NAME	TILTON, SCOTT	4.2 NAME		
STREET ADDRESS	GREEN STREET	4.3 STREET ADDRESS		
CITY-ST-ZIP	DOVER-FOXCROFT ME	4.4 CITY-ST-ZIP		
TITLE	D	5.1 TITLE		☐ Change ☐ Addition
NAME	PRIDE, LIZA S.	5.2 NAME		
STREET ADDRESS	2405 ARDSON PL N 904A	5.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL	5.4 CITY-ST-ZIP		
TITLE	D	6.1 TITLE		☐ Change ☐ Addition
NAME	ELLIS, SHIRLEY P.	6.2 NAME		
STREET ADDRESS	3450 W PEBBLE BEACH CT	6.3 STREET ADDRESS		
CITY-ST-ZIP	LECANTO FL	6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Vandy E. Hewett — Vandy E. Hewett — 2/16/95 — 207-876-3315
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0200783 CP