2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Mar 14, 2006 8:00 am Secretary of State **DOCUMENT #313008** 1. Entity Name 03-14-2006 90031 040 ***158.75 TOWNLEY ENGINEERING AND MANUFACTURING COMPANY, INC. Principal Place of Business Mailing Address 107 NE 1ST AVENUE 10251 SE 110TH ST ROAD P 0 BOX 221 OCALA, FL 34470 CANDLER, FL 32111-0221 3. Mailing Address 2. Principal Place of Business 2215 SE Ft King St Suite, Apt. #, etc. Suite, Apt. #, etc. 01192006 Chg-P CR2E034 (11/05) Ste B Applied For City & State 4. FEI Number City & State Ocala, 59-1205861 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired K Fee Required 34471 USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TOWNLEY, J.O. J Street Address (P.O. Box Number is Not Acceptable) 10551 SE 110TH ST RD CANDLER, FL 32111 City Zip Code FI 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. I am familiar with, and accept the obligations of registered agent. . . DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be П Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE -☐ Delete TITLE Change Addition TOWNLEY, WILLIAM P NAME NAME STREET ADDRESS STREET ADDRESS P O BOX 221 2212 CITY-ST-ZIP CANDLER, FLA32111 CITY-ST-ZIP TITLE VSD ☐ Change ☐ Addition Delete TITI F DEAN, SARAH T NAME NAME STREET ADDRESS STREET ADDRESS P O BOX 221 CITY-ST-ZIP CANDLER, FL 32111 CITY-ST-ZIP PD TITLE TITLE ☐ Change ☐ Addition Delete NAMÉ TOWNLEY, JO, JR NAME STREET ADDRESS P O BOX 221 STREET ADDRESS CITY-ST-ZIP CITY-ST-78 CANDLER, FL 32111 TITLE ☐ Delete TITLE ☐ Channe ☐ Addition

FILED

☐ Change

Change

Addition

☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 a yaddress, with all other like empowered.

CITY-ST-ZIP

NAME STREET ADDRESS

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SIGNATURE: ✓

NAME

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NAME STREET ADDRESS

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NAME

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STREET ADDRESS

CITY-ST-7IP

TOWNLEY, TIMOTHY

CANDLER, FL 32111

TOWNLEY, WILLIAM V

CANDLER, FL 32111

TOWNLEY, SAMUEL J

BECKLEY, WV 25801

106 STATION ST

P O BOX 221

P.O. BOX 215

☐ Delete

☐ Delete

Sarah T. Dean