2001 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 20, 2001 8:00 am Secretary of State **DOCUMENT # 327351** 1. Entity Name PENSACOLA TESTING LABORATORIES INC 04-20-2001 90016 023 ***150.00 Mailing Address Principal Place of Business 217 EAST BRENT LANE 217 EAST BRENT LANE PENSACOLA FL 32503 PENSACOLA FL 32503 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-1216122 Not Applicable Country **\$8.75** Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WHEELER, PATRICK A. Street Address (P.O. Box Number is Not Acceptable) 217 E BRENT LN PENSACOLA FL 32503 Zip Code 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 DATE 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 Make Check Payable to Department of State (See criteria on back) П ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CR2E034 (10/00) ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME WHEELER, TERRY F. STREET ADDRESS STREET ADDRESS 2990 MAGNOLIA AVE. CITY-ST-ZIP CITY-ST-ZIP PENSACOLA, FL 00000 ☐ Addition Change Change ☐ Delete TITLE TITLE WHEELER, PATRICK A WHEELER, PATRICK A NAME NAME 1667 KALLAI CE STREET ADDRESS 751 PENSACOLA BCH RD STREET ADDRESS GUIP BREEZE, FL CITY-ST-ZIP CITY-ST-ZIP PENSACOLA BEACH FL Addition Change Delete TITLE TITLE WHEELER, MARGARET A NAME NAME STREET ADDRESS 3553 LAGUNA COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **GULF BREEZE FL** ☐ Change ☐ Addition TITLE ☐ Delete TITLE WHEELER, DAVID B. NAME NAME STREET ADDRESS STREET ADDRESS 807 PANFERIO DR. CITY-ST-ZIP CITY-ST-ZIP PENSACOLA BCH. FL ☐ Delete ☐ Change ☐ Addition TITLE TITLE JOHNSON, MICHAEL A. NAME STREET ADDRESS STREET ADDRESS 3363 ESPANOLA STREET CITY-ST-ZIP CITY-ST-ZIP GULF BREEZE FL ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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. TERRY F. WHEELER 4/16/01 (950) 471-5100 SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR