2002 UNIFORM BUSINESS REPORT (UBR)

Feb 04, 2002 8:00 am DOCUMENT # 362250 **Secretary of State** 1. Entity Name 02-04-2002 90052 028 ***158.75 HARRY W. MARLOW, INC. Principal Place of Business Mailing Address 3941 68TH AVE NORTH 3941 68TH AVE NORTH PINELLAS PARK FL 33781-6136 PINELLAS PARK FL 33781 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1290114 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired X. Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MARLOW, HARRY W Street Address (P.O. Box Number is Not Acceptable) 3941 68TH AVE N PINELLAS PARK FL 33781 City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 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, 2002 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 12. (10/6) TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME MARLOW, HARRY W CR2E034 5440 72ND AVE N STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PINELLAS PARK FL CITY-ST-ZIP ☐ Delete Change ☐ Addition NAME MARLOW, STEPHEN E. NAME MARLOW, STEPHEN E. STREET ADDRESS STREET ADDRESS 10163 64TH ST N 7195 55th St. N. PINELLAS PARK FL CITY-ST-ZIP CITY-ST-ZIP Pinellas Park, FL 33781 TITLE ☐ Delete ☐ Addition STANALAND, DONALD E NAME NAME STREET ADDRESS 1432 SE 38TH AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OCALA FL TITLE ST ☐ Delete TITLE ☐ Change ☐ Addition NAME MARLOW, ELOISE S. NAME STREET ADDRESS 5440 72ND AVE. N. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PINELLAS PARK FL ☐ Change ☐ Delete TITLE Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. Thereby 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

SIGNATURE:

changed, or on an attachment with an address, with all

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/02