FILED

ິ 2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Feb 25, 2002 8:00 am Secretary of State DOCUMENT # 380584 1. Entity Name 02-25-2002 90068 014 ***150.00 SAFETY EQUIPMENT COMPANY, INC. Principal Place of Business Mailing Address 6507 N HARNEY ROAD 6507 N HARNEY ROAD TAMPA FL 33610-9595 TAMPA FL 33610-9595 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 59-2713508 Not Applicable Zip Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CRANNELL, DAVID J. Street Address (P.O. Box Number is Not Acceptable) 6507 N. HARNEY ROAD **TAMPA FL 33610** City 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, 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, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE. Change ☐ Addition NAME WARBRITTON, DAVID S. NAME STREET ADDRESS STREET ADDRESS 6507 N HARNEY RD CITY-ST-ZIP CITY-ST-7IP TAMPA FL TITLE PD ☐ Detete TITLE Change ☐ Addition NAME CRANNELL, DAVID J NAME STREET ADDRESS STREET ADDRESS 6507 N HARNEY RD CITY-ST-7/P CITY-ST-ZIP TAMPA FL TITLE SVD ☐ Delete TITLE Change ☐ Addition NAME" CRANNELL, RICHARD H. NAME STREET ADDRESS 6507 N HARNEY RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP tampa fl TITLE CF₀ 🕽 Delete [1] Change ☐ Addition BRANSKY, L. STACY NAME STREET ADDRESS STREET ADDRESS 6507 N HARNEY RD CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33610 ☐ Delete TITLE [] Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

Richard H. Crannew 2/13/12 813-649-1