2001 UNIFORM BUSINESS REPORT (UBR) FILED Jan 30, 2001 8:00 am Secretary of State **DOCUMENT # 491751** 1. Entity Name GAYLORD/MILLER ELECTRIC CORPORATION 01-30-2001 90026 046 ***158.75 Principal Place of Business Mailing Address 602 N OREGON AVE 602 N OREGON AVE TAMPA FL 33606-0006 TAMPA FL 33606-0006 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-1631953 Not Applicable Zip Country \$8.75 Additional X 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MILLER, DONALD P. Street Address (P.O. Box Number is Not Acceptable) 5401-C BAYSHORE BLVD, STE 3 **TAMPA FL 33611** 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 (See criteria on back) Make Check Payable to Department of State 11, OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition MILLER, DONALD P NAME NAME 5401 BAYSHORE BLVD, STE 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TAMPA FL CITY-ST-ZIP STD TITI F ☐ Delete TITLE ☐ Change ☐ Addition MILLER, BONNIE L NAME NAME STREET ADDRESS 5401 BAYSHORE BLVD, STE 3 STREET ADDRESS CITY-ST-7IP TAMPA FL CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE MCCASLAND, WILLIAM G NAME NAME STREET ADDRESS 1411 E-HENRY ST ~ STREET ADDRESS CITY-ST-ZIP TAMPA FL CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition MROCZKOWSKI, SCOTT J NAME STREET ADDRESS 550 EMBERWOOD DRIVE STREET ADDRESS CITY-ST-ZIP **BRANDON FL** CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition TEPPER, JAMES A NAME NAME 2811 W PATTERSON ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Tampa Fl CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Donnie L. Miller 01-19-01 813-254-4681

Date Dayline Phone #