2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 508099 May 26, 2000 8:00 am Secretary of State 1. Entity Name STEVENS LIGHTING SUPPLY, INC. 05-26-2000 90039 001 ***150.00 Principal Place of Business Mailing Address P.O. BOX 1908 12000 A AUTOMOBLIE BLVD PINELLAS PARK FL 33780-1908 TEADWATED FL 33762 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1689491 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name STEVENS, PEGGY A Street Address (P.O. Box Number is Not Acceptable) 12880-A AUTOMOBILE BLVD **CLEARWATER FL 33762** 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. 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 After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. Change ☐ Addition TITLE ☐ Delete TITLE HAVERLAND, GARRY J NAME NAME 12880-A AUTOMOBILE BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **CLEARWATER FL 33762** CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE STEVENS, PEGGY A. NAME NAME 12880-A AUTOMBILE BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **CLEARWATER FL 33762** ☐ Change ☐ Addition TITLE TITLE ☐ Delete PUCKETT, BRENDA NAME NAME STREET ADDRESS 100 AMIGO RD STREET ADDRESS CITY-ST-ZIP DANVILLE CA CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete HAVERLAND, ROSEMARY NAME NAME 12880-A AUTOMOBILE BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **CLEARWATER FL 33762** ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR / Date Daytome Phone #

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

with an address, with all other like empowered.