2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 27, 2001 8:00 am § Secretary of State DOCUMENT # 758577 1. Entity Name ASSOCIATED INDUSTRIES OF FLORIDA 02-27-2001 90025 001 ***122.50 Principal Place of Business Mailing Address 516 N ADAMS ST P. O. BOX 784 RIGIO P.O. BOX 784 TALLAHASSEE FL 32302 TALLAHASSEE FL 32301 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 59-0148010 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) SHEBEL, JON L 516 NORTH ADAMS STREET TALLAHASSEE FL 32301 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) DATE FILE NOW: 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 CD TITLE ☐ Delete TITLE Addition KEESLER, ALLEN J JR NAME NAME STREET ADDRESS 1345 SMALL HARBOR DRIVE, NE STREET ADDRESS 1345 Snell Harbor Drive, N.E. CITY-ST-ZIP ST PETERSBURG FL 33704-3033 CITY-ST-ZIP TITLE ☐ Addition TITLE ☐ Delete ☐ Change NAME SHEBEL, JON L NAME STREET ADDRESS STREET ADDRESS 516 N.ADAMS ST CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL 32301 TSD ☐ Delete TITLE ★ Change ☐ Addition BOWDEN, TRAVIS J NAME NAME STREET ADDRESS STREET ADDRESS **500 BAYFRONT PARKWAY** One Energy Place CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL 32501 32520-0100 TITLE ☐ Delete TITLE Change ☐ Addition NAME WEST, ROBERT W NAME STREET ADDRESS STREET ADDRESS 2335 Carefree Cove 3082 WATTERFORD DR CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL 32308 32308-5777 TITLE Delete TITI F NAME FAIRBANKS, J N NAME Lacher, Joseph P. STREET ADDRESS STREET ADDRESS 111 PONCE DE LEON AVE 150 W. Flagler St., Ste. 1901 CITY-ST-ZIP CITY-ST-ZIP CLEWISTON FL 33440 <u>Miami, FL 33130</u> TITLE TITLE ☐ Delete ☐ Change Addition NAME WACKENHUT, RICHARD R NAME STREET ADDRESS STREET ADDRESS 4200 WACKENHUT DRIVE #100 CITY-ST-7IP CITY-ST-ZIP PALM BEACH GARDENS FL 33410-4243 12. I hereby certify that the information supplied with this filing does not qualify indicated on this report or supplement type or is true and accurate and the of the corporation or the receiver of the empowered to execute this report. for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information my signature shall have the same legal effect as if made under oath; that I am an officer or director as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

ent & CEO

SIGNATURE:

of the corporation or the rece changed, or on an attachme

01-22-01

(850)224-7173