2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # **F33254** Apr 03, 2000 8:00 am Secretary of State 1. Entity Name HARBOR ELECTRONICS OF FORT PIERCE, INC. 04-03-2000 90190 031 ***150.00 Principal Place of Business Mailing Address 2303 N. FEDERAL HIGHWAY 2303 N. FEDERAL HIGHWAY FT PIERCE FL 34946-8930 FT PIERCE FL 34946 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2091644 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MCVEY, LEONARD JR. Street Address (P.O. Box Number is Not Acceptable) 2303 N. FEDERAL HIGHWAY FT PIERCE FL 34946 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 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 (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. PD Change ☐ Addition CR2E034 (9/99 TITLE TITLE ☐ Delete DAVIS, ANN NAME NAME 2743 SENECA AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT PIERCE FL 34946 CITY-ST-ZIP Change Addition ☐ Delete TITLE MCVEY LEONARD IR. 2303 W. FEDERAL HIGHWAY TITLE MCVEY, LEONARD, JR. NAME NAME 2555 SENECA AVE 1. STREET ADDRESS STREET ADDRESS 34946 FOAT PIERCE CITY-ST-ZIE FT PIERCE FL 34946 CITY-ST-ZIP Delete McVEY, LEONARD JO 2303 N. FEDERAL HIGHWAY ☐ Addition TITLE TITLE MCVEY, LEONARD, JR. NAME NAME 2555 SENECA AVE STREET ADDRESS STREET ADDRESS 34946 PIERCE FL CITY-ST-7IP FT PIERCE FL 34946 CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS 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

Date

Daytime Phone #