2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **F93000002496** May 09, 2000 8:00 am Secretary of State COOPER COIL COATING, INC. 05-09-2000 90093 016 ***150.00 Principal Place of Business Mailing Address 5110 140TH AVE NORTH 5110 140TH AVE NORTH CLEARWATER FL 33760-3753 CLEARWATER FL 33760 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 58-2050685 Not Applicable Country Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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!!! 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change Addition ☐ Delete TITLE KEEGAN, NICK NAME NAME THE COURTYARD, WARWICK ROAD HILL END HOUSE, CHURCH LANE STREET ADDRESS STREET ADDRESS SOLIHULL, WEST MIDLANDS, ENGLAND CITY-ST-ZIP CITY-ST-ZIP WHITINGTON, WORCHESTER ENGLA ☐ Change ☐ Addition **Delete** TITLE TITLE LARGE, DONALD NAME NAME STREET ADDRESS HILL END HOUSE, CHURCH LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WHITINGTON, WORCHESTER ENGLA ☐ Change ☐ Addition Delete TITLE TITLE NAME VADEN, RONALD C NAME STREET ADDRESS STREET ADDRESS 5110 140TH AVE NORTH CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL **X** Addition ☐ Change TREASURER - DIRECTOR ☐ Delete TITLE NAME DAVID WAKELEY NAME THE COURTYARD, WARWICK ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SOLIHULL, WEST MOLANDS, ENGLAND CITY-ST-ZIP CLERATIONS MANAGER ☐ Change **Addition** Delete TITLE TITLE PETER O'DONOVAN NAME NAME 5110 140TH AVENUE HORTH STREET ADDRESS STREET ADDRESS CLEARWATER, FL 33760 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP

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.

SIGNATURE:

| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date | Da

13. Thereby 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