DOCUMENT # F9400000694  1. Entity Name GEORGE H. PASTOR & SONS, INCORPORATED						Mar 31, 2000 8:00 an Secretary of State 03-31-2000 90107 037 ***150.00				
Principal Plac 34018 BEACON LIVONIA MI 481		Mailing Address 34018 BEACON RD LIVONIA MI 48150-1533 US				DO NOT WRITE IN THIS SPACE  4. FEI Number 38-2420668  Applied For				
2. Principal F Suite, Apt.	Place of Business	3. Mailing Address Sulte, Apt. #, etc.								
City & Stat	te:	City & State								
Zip	Country Zip		Coun	Country		5 Certificate of Status Decired  \$8.75			Not Applicable Additional quired	
••••	6. Name and Address of Curre	nt Registered Agent			.7.	Name and Address of New Reg	Istered Agent	<u> </u>		
3250	Ter, Richard J Ste 5 Sen Beach fl 34957		Name Street Addr							
				City			FL Z	ip Code		
8. The above	e named entity submits this statement			ed office ar rep		_	DATE	,		
Gu Tax filing i	oration is eligible to satisfy its intanging requirement and elects to do so. ria on back)	After MAY 1, 2	000 Fee		State	Election Campaign Finar Trust Fund Contribution.		Added	May Be to Fees	
TITLE NAME CONTEST STREET ADDRESS CITY-ST-ZIP	OFFICERS AF CEO PASTOR; RICHARD; 1992; 1993 35758 NANCY GAIL FARMINGTON HILLS MI	D DIRECTORS  Delete  Chick ONVERT			A	DDITIONS/CHANGES TO OFFIC		CTORS thange	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Delete PASTOR, NOHN 31140 LYNDON LIVONIA MI 48154			E E ET ADDRESS -ST-ZIP	John Pastor 31140 Lyndry Livonia, Mt 48154			Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PASTOR, CRAIG 20072 PARKER LIVONIA MI 48152	☐ Delete		. (		7		thange	Addition	
TITLE NAME STREET ADORESS CITY-ST-ZIP	ST PASTOR, TIMOTHY 12840 STANLEY BELLEVILLE MJ 48111	☐ Delețe						hange	☐ Addition	
FITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						hange	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	☐ Delete		1			<u> </u>	hange	☐ Addition	
of the co changed	certify that the information supplied we can this report or supplemental report poration or the receiver or trustee en or on an attachment with an address	npowered to execute this repowered an ampowered an ampowered and an ampowered analysis and ampowered an ampowered and ampowered analysis and ampowered an ampowered an ampowered analysis and ampowered and ampowered analysis and ampowered and ampowered analysis and ampow	d as requi	mption stated ture shall have red by Chapte	r 607, Flo	119.07(3)(i), Florida Statutes. I full legal effect as if made under oat ride Statutes; and that my name of the control of the	ippears in Bloc	K 11 OF I	BIOCK 12 II	
SIGNAT		R PRINTED MANE OF SIGNING OFFICE	R OR DIRECT	OR		Date Date	Daytime F		<del>-</del>	

**FILED**