2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000000599

1. Entity Name
MATSON LUMBER COMPANY

FILED
Sep 18, 2000 8:00 am
Secretary of State
09-18-2000 90034 021 ***550.00

Principal Place of Business
100 ANCHOR DR.
KEY LARGO FL 33037-5273

Mailing Address
C/O SCHNEIDER DOWNS & CO. INC
1133 PENN AVE.
PITTSBURGH PA 15222-4205

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
24 Dockside Lane
Suite, Apt. #, etc.
PMB 489
City & State
Key Largo, FL
Zip 33037-5273 Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number 25-1431028 Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
MATSON, ROBERT D
100 ANCHOR DR.
KEY LARGO FL 33037-5273

7. Name and Address of New Registered Agent
Name Robert D. Matson
Street Address (P.O. Box Number is Not Acceptable) 24 Dockside Lane
City Key Largo FL Zip Code 33037-5273

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $550.00
After SEPTEMBER 13, 2000 Min. will be $750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	CD ☐ Delete	TITLE	CD ☒ Change ☐ Addition
NAME	MATSON, ROBERT D	NAME	Robert D. Matson
STREET ADDRESS	100 ANCHOR DR.	STREET ADDRESS	24 Dockside Lane
CITY-ST-ZIP	KEY LARGO FL 33037-5273	CITY-ST-ZIP	Key Largo, FL 33037-5273
TITLE	VD ☐ Delete	TITLE	PD ☒ Change ☐ Addition
NAME	MATSON, BECKY JO	NAME	Becky Jo Matson
STREET ADDRESS	132 MAIN ST.	STREET ADDRESS	132 Main Street
CITY-ST-ZIP	BROOKVILLE PA 15825	CITY-ST-ZIP	Brookville, PA 15825
TITLE	T ☐ Delete	TITLE	V ☐ Change ☒ Addition
NAME	DOMENICK, LEONARD	NAME	Joan M. Matson
STREET ADDRESS	132 MAIN ST.	STREET ADDRESS	24 Dockside Lane
CITY-ST-ZIP	BROOKVILLE PA 15825	CITY-ST-ZIP	Key Largo, FL 33037-5273
TITLE	PD ☒ Delete	TITLE	☐ Change ☐ Addition
NAME	CONTI, RICHARD A	NAME	
STREET ADDRESS	132 MAIN ST.	STREET ADDRESS	
CITY-ST-ZIP	BROOKVILLE PA	CITY-ST-ZIP	
TITLE	V ☒ Delete	TITLE	☐ Change ☐ Addition
NAME	ENGLISH, JEAN	NAME	
STREET ADDRESS	132 MAIN ST.	STREET ADDRESS	
CITY-ST-ZIP	BROOKVILLE PA 15825	CITY-ST-ZIP	
TITLE	V ☐ Delete	TITLE	VD ☒ Change ☐ Addition
NAME	CONTI, BARBARA A	NAME	Barbara A. Conti
STREET ADDRESS	132 MAIN ST	STREET ADDRESS	132 Main Street
CITY-ST-ZIP	BROOKVILLE PA	CITY-ST-ZIP	Brookville, PA 15825

CR2E034 (5/00)

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 9/13/00 814-849-5334
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #