2000 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 13, 2000 8:00 am Secretary of State DOCUMENT # F9500001905 1. Entity Name PORT CITY ELECTRICAL SUPPLY, INC. 04-13-2000 90077 004 ***150.00 Principal Place of Business Mailing Address 20 N. ORANGE AVENUE. STE 200 612 E 69TH ST SAVANNAH GA 31416 ORLANDO FL 32801-4604 00059297 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3305238 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 THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET, STE 105 TALLAHASSEE FL 32301 Zip Code City 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS DP TITI F Change ☐ Addition TITLE ☐ Delete HALL, A STEWART JR NAME NAME 20 N. ORANGE AVENUE, STE 200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ORLANDO FL Secretary XX Change ☐ Addition ☐ Delete TITLE TITLE BUTTERFIELD, BENJAMIN P NAME 20 N ORANGE AVE STE 200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO FL CITY-ST-7/P DC Addition ☐ Delete ☐ Change TITLE HUGHES, DAVID H NAME NAME 20 N. ORANGE AVENUE, STE 200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIF ORLANDO FL CITY-ST-ZIP ☐ Change Addition TITLE Delete HUGHES, DAVID H NAME 20 N. ORANGE AVENUE, STE 200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL AS/AT SAT **XX**Change ☐ Delete TITI F Addition TITLE CLARK, JAY NAME NAME STREET ADDRESS 20 N. ORANGE AVENUE, STE 200 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME

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 of 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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

ct Hall, Ja YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE AND

CR2Fn34 /9/99