FILED

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Feb 21, 2002 8:00 am DOCUMENT # F96000002541 **Secretary of State** 1. Entity Name 02-21-2002 90112 047 \*\*\*150.00 UNITED STATES PIPE AND FOUNDRY COMPANY, INC. Principal Place of Business Mailing Address 1500 N. DALE MABRY HWY. P.O. BOX 10406 BIRMINGHAM AL 35202 TAX DEPT. 7-EAST **TAMPA FL 33607** 2. Principal Place of Business 3. Mailing Address 4211 W. Boy Scout Blvd. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Tax Dept. Suite 1000 -Applied For City & State City & State 4. FEI Number 13-3429804 Tampa, FL 33607 Not Applicable Country Zip 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 C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 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 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 Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 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. (10/6) ☐ Addition TITLE Change TITLE PCOD ☐ Delete NAME NAME FIFIELD, RALPH E CR2E034 STREET ADDRESS STREET ADDRESS 3300 1ST AVENUE NORTH CITY-ST-ZIP CITY-ST-ZIP BIRMINGHAM AL 35222 XX Delete Change **XX**Addition TITLE TITLE **VPAS** William F. Ohrt NAME NAME WULT, FRANK A 4211 W. Boy Scout Blvd. STREET ADDRESS STREET ADDRESS 1500 N DALE MABRY HWY Tampa, FL CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33607 TITLE ☐ Change ☐ Addition Delete TITLE **VCFO** NAME NAME MURRAY, JAMES R STREET ADDRESS STREET ADDRESS 3300 1ST AVE. N. CITY-ST-ZIP CITY-ST-7IP **BIRMINGHAM AL 35222** XXX Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME EISCH CYNTHIA B 4211 W. Boy Scout Blvd. STREET ADDRESS STREET ADDRESS 1500 N DALE MABRY HWY CITY-ST-ZIP CITY-ST-ZIP TAMPA FL XX Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME PORTER, EDWARD A 4211 W. Boy Scout Blvd. STREET ADDRESS STREET ADDRESS 1500 N. DALE MABRY HWY CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33607 TITLE ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

Cynthia B. Eisch, Assistant Treasurer 2/15/2002 813.871.4273

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