2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **F9600006276** Mar 21, 2000 8:00 am **Secretary of State** BECK MANUFACTURING, INC. 03-21-2000 90067 027 ***150.00 Principal Place of Business Mailing Address 330 E. NINTH ST PO BOX 510 WAYNESBORO PA 17268-0510 WAYNESBORO PA 17268-0510 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 25-1513902 Not Applicable Country Zip \$8.75 Additional Country Zip 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 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 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, 2000 Fee will be \$550.00 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 TITLE. BECK, STEPHEN E NAME NAME STREET ADDRESS 12413 WEDGEWOOD DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WAYNESBORO PA 17268 ☐ Change ☐ Addition ☐ Delete TITLE BECK, THOMAS E NAME NAME STREET ADDRESS 1001 E. MAIN ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **WAYNESBORO PA 17268** Change ☐ Addition TITLE ☐ Delete TITLE BECK, J. EDWARD JR NAME NAME 809 E. MAIN ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **WAYNESBORO PA 17268** ☐ Addition ☐ Change TITLE ☐ Delete TITLE BECK, MICHAEL D NAME NAME STREET ADDRESS 1005 E. MAIN ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WAYNESBORO PA 17268 ☐ Addition Change TITLE ☐ Defete TITLE NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

13. I hereby certify that the information supplied with this filling 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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME O

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