

**2001 UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT # F9800000 4240**  
 1. Entity Name  
**PIEDMONT FAN DYNAMICS INC**

Principal Place of Business      Mailing Address  
**19029 US HWY 19N # 14E**      **19029 US HWY 19N # 14E**  
**CLEARWATER FL 33764**      **CLEARWATER FL 33764**

2. Principal Place of Business      3. Mailing Address  
**1293 N. McMULLEN BOOTH**      **1293 N. McMULLEN BOOTH**  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State  
**CLEARWATER FL**      **CLEARWATER FL**  
 Zip      Country      Zip      Country  
**33759**           **33759**           **-**      **-**

4. FEI Number      Applied For  
**56-1858268**      Not Applicable  
 5. Certificate of Status Desired       - \$8.75 Additional Fee Required

771249

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent  
**THOMAS E HEAD**  
**19029 US HWY 19N #14E**  
**CLEARWATER FL 33764**

7. Name and Address of New Registered Agent  
 Name      **THOMAS E. HEAD**  
 Street Address (P.O. Box Number is Not Acceptable)  
**1293 N. McMULLEN BOOTH**  
 City      **CLEARWATER**      FL      Zip Code      **33759**

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      Thomas E Head      **THOMAS E. HEAD**      **4/29/01**  
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)

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

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PC</b> <b>HEAD, THOMAS E.</b> <b>19029 US HWY 19N #14E</b> <b>CLEARWATER FL 33764</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VVST</b> <b>HEAD, DORA L</b> <b>1700 WATCHEZ TRACE</b> <b>GREENSBORO NC 27455</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PC</b> <b>HEAD, THOMAS E.</b> <b>1293 N. McMULLEN BOOTH</b> <b>CLEARWATER FL 33759</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:      Thomas E Head      **THOMAS E. HEAD**      **PRESIDENT**      **04/29/01**  
Signature and typed or printed name of principal officer or director. DATE

CR20034 (11/00)

*Attachment*  
*#F98000004240*  
*771249*

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4/30/01 CORPORATE DETAIL RECORD SCREEN 8:28 A  
 NUM: F98000004240 ST:NC ACTIVE/FOREIGN PROF FLD: 07/24/1998  
 FEI#: 56-1858268  
 NAME : PIEDMONT FAN DYNAMICS INC.  
 PRINCIPAL: 19029 US HWY 19N CHANGED: 06/29/99  
 ADDRESS CLEARWATER, FL 33764  
 RA NAME : HEAD, THOMAS E  
 RA ADDR : 19029 US HWY 19N ADDR CHG: 06/29/99  
 CLEARWATER, FL 33764  
 ANN REP : (1999) AN 06/29/99 (2000) AY 05/03/00

4/30/01 OFFICER/DIRECTOR DETAIL SCREEN 8:29 A  
 CORP NUMBER: F98000004240 CORP NAME: PIEDMONT FAN DYNAMICS INC.  
 TITLE: PC NAME: HEAD, THOMAS E  
 19029 US HWY 19N  
 CLEARWATER, FL 33764  
 TITLE: VVST NAME: HEAD, DORA L  
 1700 NATCHEZ TRACE  
 GREENSBORO, NC 33759