2001 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 31, 2001 8:00 am Secretary of State DOCUMENT # **F98000005940** WESCO TURF SUPPLY, INC. 01-31-2001 90040 011 ***158.75 Principal Place of Business Mailing Address 300 TECHNOLOGY PARK 300 TECHNOLOGY PARK LAKE MARY FL 32746 LAKE MARY FL 32746 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 52-2120964 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 MOORE, LENARD Street Address (P.O. Box Number is Not Acceptable) 2101 CANTU COURT SARASOTA FL 34232 City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE <u>C</u> 2 PCD Delete TITLE ☐ Addition NAME GAMBLE SR, WILLIAM NAME STREET ADDRESS 2101 CANTU COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL TITLE VST Delete TITLE Change ☐ Addition MOORE, LENARD NAME STREET ADDRESS STREET ADDRESS 2101 CANTU COURT CITY-ST-ZIP CITY-ST-ZIP Sarasota Fl TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME ROBINSON, ZELIG NAME STREET ADDRESS 233 EAST REDWOOD STREET STREET ADDRESS CITY-ST-ZIP BALTIMORE MD CITY-ST-ZIP TITLE AS Delete TITLE ☐ Change Addition NAME Tendler, Hillel NAME STREET ADDRESS 233 EAST REDWOOD STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BALTIMORE MD TITLE ☐ Delete TITLE Addition Change NAME CONLON, FARRELL STREET ADDRESS 300 TECHNOLOGY PARK STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKE MARY FL TITLE PD ☐ Delete TITLE Change Addition NAME GAMBLE, JOHN NAME STREET ADDRESS 300 TECHNOLOGY PARK STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ake mary fl

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 w address, with all other like empowered.

SIGNATURE: >

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR