2002 Uniform Business Report (UBR)

of the corporation or the receiver or trustee empewered changed, or on an attachment with an address with all

SIGNATURE:

Mar 12, 2002 8:00 am Secretary of State F99000001431 DOCUMENT # 1. Entity Name BOILER-TEK, INC. 03-12-2002 90998 047 ***150.00 Principal Place of Business Mailing Address 9700 CELESTE RD. 9700 CELESTE RD. SARALAND AL 36571 SARALAND AL 36571 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 63-1054480 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current 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 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. (9/01) ☐ Addition X Change X Delete TITLE President TITLE PCD MOODY, O T NAME 🛼 NAME Charles H. Hendrickson CR2E034 46861 ROCK HILL RD STREET ADDRESS STREET ADDRESS 9700 Celeste Road CITY-ST-7IP Saraland, AL CITY-ST-ZIP BAY MINETTE AL Change ☐ Addition TITLE ☐ Delete TITLE **VD** NAME EVERETT, SAMUEL NAME STREET ADDRESS STREET ADDRESS 9271 IRVINGTON B.L.B HWY CITY-ST-ZIP CITY-ST-ZIP IRVINGTON AL Change ☐ Addition TITLE ☐ Delete TITLE VSD NAME **EVERETT, TERRANCE** NAME STREET ADDRESS STREET ADDRESS 9629 RANCH RD. CITY-ST-7IP CITY-ST-ZIP IRVINGTON AL [] Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Change Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-ST-7IP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7/P 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 emperature of the corporation or the receiver or trustee emperature of the corporation of the receiver of trustee emperature of the corporation of the receiver or trustee emperature of the receiver of trustee emperature of the receiver of trustee emperature of the receiver of the receiver of trustee emperature of the receiver of trust

Date

Daytime Phone #

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