

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2001 8:00 am
Secretary of State
 04-17-2001 90111 014 ***150.00

DOCUMENT # G68228

1. Entity Name
MARION ELECTRIC MOTORS, INC.

Principal Place of Business Mailing Address
~~220 SE 14TH AVE~~ **1330 SE 33rd Ct** ~~220 SE 14TH AVE~~ **1330 SE 33rd Ct**
OCALA FL 34471 **OCALA FL 34471**
US **US**

2. Principal Place of Business 3. Mailing Address
1330 SE 33rd Ct **1330 SE 33rd Ct**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
OCALA, FL **OCALA, FL**

Zip Country Zip Country
34471 **MARION** **34471** **MARION**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NEEDHAM, WILLIAM PAT
~~1001 NORTH MAGNOLIA AVE~~ **1330 SE 33rd Ct**
OCALA FL 34471

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
 Signature, typed or printed name of registered agent and title if applicable.

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **PD**
 STREET ADDRESS ~~1001 N MAGNOLIA AVE~~ **1330 SE 33rd Ct**
 CITY-ST-ZIP **OCALA FL 34471**

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **1330 SE 33rd Ct**
 CITY-ST-ZIP **OCALA, FL 34471**

TITLE ☐ Delete
 NAME **ST**
 STREET ADDRESS ~~1001 N MAGNOLIA AVE~~ **1330 SE 33rd Ct**
 CITY-ST-ZIP **OCALA FL 34471**

TITLE ☒ Change ☐ Addition
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 CITY-ST-ZIP **OCALA, FL 34471**

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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: William P. Needham **4/10/01** **352-132-6605**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)