2003 FOR PROFIT CORPORATION

FILED Jan 29, 2003 8:00 am **UNIFORM BUSINESS REPORT (UBR) Secretary of State** H57984 DOCUMENT # 1. Entity Name 01-29-2003 90144 026 ***150.00 PATE ELECTRIC, INC. Principal Place of Business Mailing Address **20014044** 2336 INDUSTRIAL DR. 2336 INDUSTRIAL DR. PANAMA CITY FL 32405 PANAMA CITY FL 32405 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 59-2540206 Not Applicable Zip Country ~~ - -Zip 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 PATE, DANIEL RAYMOND Street Address (P.O. Box Number is Not Acceptable) 2336 INDUSTRIAL DR. PANAMA CITY FL 32405-3038 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Addition ☐ Delete NAME PATE, DANIEL R. NAME 2336 INDUSTRIAL DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PANAMA CITY FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition PATE, CHARLIE NAME NAME 2336 INDUSTRIAL DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PANAMA_CITY_FL CITY-ST-ZIP ☐ Change ☐ Delete TITLE Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Delete TITLE ☐ Change ☐ Addition TIT! F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change Addition NAME

12. 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 receiper or rustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachme

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TITLE

NAME

SIGNATURE:

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CITY-ST-ZIP

TITLE

NAME

TOPED OF PRINTED NAMED OF BIGHT CORPETED OR DIRECTOR

Delete

27 January 2003

(850) 763~1066

Daytime Phone #

☐ Change

Addition