

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # 934608

1. Entity Name
SWITCHGEAR UNLIMITED, INC.



FILED
05 MAY 11 PM 2:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
C/O JEFFREY W. WARREN
220 S. FRANKLIN STREET
TAMPA, FL 33602

Mailing Address
C/O JEFFREY W. WARREN
220 S. FRANKLIN STREET
TAMPA, FL 33602

2. Principal Place of Business
1401 MERCANTILE CT
Suite, Apt. #, etc.

3. Mailing Address
1401 MERCANTILE
Suite, Apt. #, etc.



05052005 REIN-P CR2E098 (6/04)

City & State
PLANT CITY FL
Zip
33563
Country
USA

City & State
PLANT CITY FL
Zip
33563
Country
USA

4. FEI Number
59-2719027
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WARREN, JEFFREY W.
220 S. FRANKLIN STREET
TAMPA, FL 33602

7. Name and Address of New Registered Agent

Name
LAWRENCE N. LOUCKS
Street Address (P.O. Box Number is Not Acceptable)

1401 MERCANTILE CT
City PLANT CITY FL Zip Code 33563

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 LAWRENCE N. LOUCKS PRES.
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

5/5/05
DATE

FILE NOW!!! FEE IS \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE P
NAME BERRY, JAMES L.
STREET ADDRESS 4302 FAIRCOURT DR
CITY-ST-ZIP VALRICO, FL 33594 ☒ Delete

TITLE VP
NAME BERRY, JEANNE R
STREET ADDRESS 4302 FAIRCOURT DR
CITY-ST-ZIP VALRICO, FL 33594 ☒ Delete

TITLE VPS
NAME VANDEVENDER, MELINDA L
STREET ADDRESS 3308 W SAM ALLEN RD
CITY-ST-ZIP PLANT CITY, FL ☒ Delete

TITLE VP
NAME VILA, ALFRED A
STREET ADDRESS 749 SPANISH MAIN DRIVE
CITY-ST-ZIP APOLLO BEACH, FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PT
NAME LAWRENCE N. LOUCKS
STREET ADDRESS 1742 OAKWOOD ESTATES DR
CITY-ST-ZIP PLANT CITY FL 33563 ☐ Change ☒ Addition

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

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

TITLE VPS
NAME ALFRED A VILA
STREET ADDRESS 13203 SPINDLEWYCK COVE
CITY-ST-ZIP RIVERVIEW FL 33569 ☒ Change ☐ Addition

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

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

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 receiver or trustee 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 attachment with an address, with all other like empowered.

SIGNATURE: LAWRENCE N. LOUCKS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/5/05 813-752-6550
DATE DAYTIME PHONE #