FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

APPROVED AND FILED

02 SEP 26 PM 1:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100008171211--8
-10/03/02--01017--027
****550.00 ****550.00

DOCUMENT # J65513

1. Entity Name DISCOUNT CEILING FANS, INC.

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
c/o JAMES L. SPRADLIN	c/o JAMES L. SPRADLIN
Suite, Apt. #, etc. 5802 MANGO ROAD	Suite, Apt. #, etc. 5802 MANGO ROAD
City & State WEST PALM BEACH, FL	City & State WEST PALM BEACH, FL
Zip 33409 Country USA	Zip 33409 Country USA

4. FEI Number 650034629 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name JAMES L. SPRADLIN

Street Address (P.O. Box Number is Not Acceptable) 5802 MANGO ROAD

City WEST PALM BEACH FL Zip Code 33409

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.

JAMES L. SPRADLIN, REGISTERED AGENT 9-25-02
SIGNATURE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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

January 1 - May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
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

TITLE	D
NAME	SPRADLIN, JAMES L.
STREET ADDRESS	5802 MANGO ROAD
CITY-ST-ZIP	WEST PALM BEACH, FL 33409
TITLE	D
NAME	ADAMS, DENNIS R.
STREET ADDRESS	747 SUNSET ROAD
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: 687-0925
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ACCOUNT NO. : 072100000032

REFERENCE : 760915 81491A

AUTHORIZATION :

COST LIMIT : $ PPD

ORDER DATE : September 26, 2002

ORDER TIME : 12:06 PM

ORDER NO. : 760915-005

CUSTOMER NO: 81491A

CUSTOMER: Ms. Sherry Wadsworth
Jones Foster Johnston & Stubbs
505 South Flagler Drive
Suite 1100
West Palm Beach, FL 33401

RECEIVED
02 SEP 26 PM 12:57
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

NAME: DISCOUNT CEILING FANS, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Angie Glisar-EXT#1124

EXAMINER'S INITIALS: _____