

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J93875

1. Entity Name

LDL ELECTRONICS, INC.

FILED
Jun 09, 2000 8:00 am
Secretary of State

06-09-2000 90005 044 ***150.00

Principal Place of Business

670 LARRY D. LYNCH
219 E. OCEAN BLVD.
STUART FL 34994

Mailing Address

670 LARRY D. LYNCH
219 E. OCEAN BLVD.
STUART FL 34994-2218

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0011018

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LYNCH, LARRY D
13392 158TH STREET NORTH
JUPITER FL 33478

Name TROY T. TEASDALE

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

2194 SW OLYMPIC CLUB TERR.

City PALM CITY

FL

Zip Code 34990

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/27/00

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 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 PD
NAME LYNCH, LARRY D
STREET ADDRESS 13392 158TH ST. NO.
CITY-ST-ZIP JUPITER FL ☒ Delete

TITLE PD
NAME JEAN F. LYNCH
STREET ADDRESS 13392 158TH STREET NORTH
CITY-ST-ZIP JUPITER, FL 33478 ☐ Change ☒ Addition

TITLE VD
NAME LYNCH, MARK D
STREET ADDRESS 973 NW SPRUCE RIDGE DR #4
CITY-ST-ZIP STUART FL 34994 ☐ Delete

TITLE VP
NAME MARK D. LYNCH
STREET ADDRESS 2325 SW OLYMPIC CLUB TERR.
CITY-ST-ZIP PALM CITY, FL 34990 ☒ Change ☐ Addition

TITLE VD
NAME TEASDALE, TROY T
STREET ADDRESS 2194 SW OLYMPIC CLUB TERR
CITY-ST-ZIP PALM CITY FL 34990 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/00 561-286-0457
Date Daytime Phone #