## FILED 2003 FOR PROFIT CORPORATION Apr 23, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** L36413 DOCUMENT # 04-23-2003 90074 046 \*\*\*150.00 1. Entity Name GLENCO WOODWORKING MACHINERY, INC. Principal Place of Business Mailing Address 6112 28TH ST. F. PO 80X 20446 11007704 **BRADENTON FL 34204** BRADENTON FL 34203 US 2. Principal Place of Business 5035 82nd Way 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. TY CHECK HERE IF MAKING CHANGES Applied For Saca Sota 4. FEI Number City & State 65-0169602----Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired $r_{\infty}$ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LEE, H. GREG Street Address (P.O. Box Number is Not Acceptable) 2014 FOURTH STREET SARASOTA FL 34237 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 DATE (NOTE: Registered Agent signature required when reinstating) 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.1 10. 11. · 🔲 Addition TITLE ☐ Delete TITLE X Change SUNDERHAUS, SARA B. Surder hous Sara S NAME NAME 5035 62nd way E Spresta FL 34342 10 KALMIA LN. STREET ADDRESS STREET ADDRESS **OTTO NC 28763** Somsota FL CITY-ST-7IP CITY-ST-7IP ☐ Delete TITLE Change Addition ounderhous 6km D. SUNDERHAUS, GLEN D. NAME NAME 5035.82nd Way E 6551 MEANDERING WAY STREET ADDRESS STREET ADDRESS **BRADENTON FL 34202** CITY-ST-ZIP CITY-ST-ZIP Sarusdantu TITLE ☐ Delete TITLE Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP र म सर्वत्र र स्टेस्स्मा लगा स्ट्राहरू Change Delete TITLE Addition TITLE NAME NAME

12. Thereby 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

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

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CITY-ST-ZIP

CITY-ST-7IP TITLE

NAME

CR2E034 (10/02)

Change

Addition