2002 UNIFORM BUSINESS REPORT (UBR)

Mar 06, 2002 8:00 am § Secretary of State M88042 DOCUMENT # 1. Entity Name UNIFIED FLOOR, INC. Principal Place of Business Mailing Address 9393 120TH LANE NORTH 9393 120TH LANE NORTH SEMINOLE FL 33772 SEMINOLE FL 33772 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2898543 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LINDSAY, FRED Street Address (P.O. Box Number is Not Acceptable) 9393 120TH LANE NORTH SEMINOLE FL 33772 Zip Code City FL 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Change ☐ Addition □ Delete TITLE TITLE NAME NAME LINDSAY, FREDRICK H. STREET ADDRESS STREET ADDRESS 9393 120TH LANE N. CITY-ST-ZIP CITY-ST-ZIP SEMINOLE FL 33772 ☐ Addition ☐ Change ☐ Delete TITLE NAME NAME LINDSAY, FREDRICK H.,JR. 8213 SHERIDAN AVENUE SOUTH STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BLOOMINGTON MN 55431** ☐ Change ☐ Addition ☐ Delete TITLE TITLE VD NAME NAME LINDSAY, STEVEN F. STREET ADDRESS STREET ADDRESS 3438 MIDWAY CITY-ST-ZIP CITY-ST-ZIP EAU CLAIRE WI 54703 Change ☐ Addition ☐ Delete TITLE TITLE STD NAME NAMÉ LINDSAY, MARJORY STREET ADDRESS 9393 120TH LANE NORTH STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SEMINOLE FL 33772 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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.

Marjory Lindsay, Sec. Trees. 2/21/02 727-393-2992 GOFFICER BR DIRECTOR UNIFIED Floor, Inde. Dayling Phone #

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