2000 UNIFORM BUSINESS REPORT (UBR) FILED **DOCUMENT # N08693** Jul 14, 2000 8:00 am Secretary of State 1. Entity Name HORIZON SPRINKLER ASSOCIATION, INC. 07-14-2000 90005 001 \*\*\*\*61.25 Principal Place of Business Mailing Address 5318 38TH AVE W P.O BOX 7352 C/O DANA REESE C/O DANA REESE **BRADENTON FL 34209 BRADENTON FL 34210** 3, Mailing Address PO BOX 7352 2. Principal Place of Business 5306 36 THAVE CI.W. 6/0 Earl W. P Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE rice rice Applied For City & State City & State 4. FEI Number 59-2615579 radenton radenton Not Applicable \$8.75 Additional Country Zip 5. Certificate of Status Desired 4209 USA 34210 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) REESE, DANA 5318 38TH AVE. WEST Sprinkler HORIZON SPRINKLER ASSN., INC. **BRADENTON FL 34209** 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 Earl W Price Make Check Payable to 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Trust Fund Contribution. Department of State Added to Fees After September 13, 2000 min. will be \$236.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. PTD Delete TITLE TITLE ilip P. McClimon REESE, DANA NAME NAME 301 36th Ave. Cl. W. STREET ADDRESS STREET ADDRESS 5318 38TH AVE W radenton, FL 34209 CITY-ST-7IP CITY-ST-ZIP **BRADENTON FL C**hange ☐ Addition TITLE Delete TITLE W. Price ANTHONY SIEMIONKO NAME NAME 5306 36th Ave. Ci.W. STREET ADDRESS STREET ADDRESS 5302 36TH AVE CR W radenton, FL 34209 CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL** ☐ Addition Change Delete 7171 F TITI F MEYER. CORINNE NAME NAME 5109 37TH AVE CR. W. STREET ADDRESS STREET ADDRESS 34209 CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL** ☐ Change ☐ Addition ☐ Delete TITLE TITLE SHEEHAN, MORGAN NAME NAME STREET ADDRESS 5301 37TH AVE CR W. STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P **BRADENTON FL** ☐ Change ■ Addition TITLE D Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 617, 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: