2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # N27433** Mar 08, 2000 8:00 am **Secretary of State** CENTRAL FLORIDA SMACNA, INC. 03-08-2000 90036 046 ****61.25 Principal Place of Business Mailing Address 6767-N WICKHAM RD 6767-N WICKHAM RD 400 RB 400 BB MELBOURNE FL 32940 MELBOURNE FL 32940-2031 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2949075 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 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) KARR. SUSAN 6767 NORTH WICKHAM ROAD, STE. 400 **MELBOURNE FL 32940** Zip Code 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: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. **∲D**eda an an Delete. TITI E RONALD LAPIN ☐ Addition TITLE 3825 GARDENIA LUE NAME NAME CARVER, RALPH STREET ADDRESS STREET ADDRESS 2481 DINNEEN AVE ORCANDO, FL 32839 -8699 CITY-ST-7/P CITY-ST-ZIP ORLANDO FL 32804-4289 ☐ Addition JOHN MORRELL VD **⊠** Delete ☐ Change TITLE VD TITLE NAME LAPIN, RONALD NAME 5401 W. LINEBAUGH AVE STREET ADDRESS STREET ADDRESS 3825 GARDENIA AVE TAMPA, FL 33624 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32839-8699 Addition TITLE ST ☐ Delete TITLE ☐ Change RALPH CARVER D NAME TATHAM, EDNA NAME 2981 DINNERN WE STREET ADDRESS STREET ADDRESS 2845-21 AVE N ORLANDU, FL 32804 4789 CITY-ST-ZIP CITY-ST-ZIP ST_PETERSBURG FL_33713-4203 TITLE Delete TITLE MANUEL SANTANA JR D ☐ Change ☐ Addition NAME NAME FISH, KENNETH; 5010-126th Ave N. STREET ADDRESS STREET ADDRESS 2106 W CENTRAL BLVD Clearwater+ FL 34620 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL ☐ Delete TITLE ☐ Change ☐ Addition TITLE CHARLES EDWARDS NAME SINCLAIR, DAN NAME 6014 Bonacker Dr. STREET ADDRESS STREET ADDRESS 2220 2ST AVENUE SOUTH Tampa FL 33610 CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33713 Scott Vaughan D 4505 131St Ave N ☐ Delete TITLE ☐ Change Addition TITLE n TATHAM, ALBERT NAME NAME STREET ADDRESS STREET ADDRESS 2845-21 AVE N Clearwater, FL 33762 CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG FL 33713-4203 12. I hereby certify that the information supplied with this filing does not gualify 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 path; that I am an officer or director of the corporation or the receiver or fustee 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: SIGNATURE REQUIRED

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2 /29 /00

407-423-9897

Daytime Phone #

A Hachment C0034355 HN27433

DIRECTORS (CONTINUED)

Tim Vickers D 6701 Edgewater Commerce Parkway Orlando, FL 32810

John Manzella D 360 E. Landstreet Rd. Orlando, FL 32824 addition