2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attach

SIGNATURE:

FILED DOCUMENT # **N96000004557** May 26, 2000 8:00 am 1. Entity Name Secretary of State THE MANUFACTURING LEADERSHIP COUNCIL, INC. 05-26-2000 90097 030 ****61.25 Principal Place of Business Mailing Address POST OFFICE BOX 442 3 BLOCKHOUSE COURT ORMOND BEACH FL 32174 ORMOND BEACH FL 32174-3020 2. Principal Place of Business 3. Mailing Address 3 Blockhouse Court 3 Blockhouse Court Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Ormond Beach, FL Ormond Beach, FL Applied For City & State City & State 4. FEI Number 59-3409907 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired 32174-3020 32174-3020 U.S.A: U.S.A. Fee Required 6. Name and Address of Current Registered Agent 7._Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) FIFER, LOU 3 BLOCKHOUSE COURT ORMOND BEACH FL 32174 - 3020 City Zip Code ntity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida 8. The above na 5 January 2000 L.J.FIFER SIGNATURE ed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Department of State Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Addition Addition TITLE **X** Delete TITLE NAME NAME KEESECKER, BOB KXXXXXXXXX Lenz, Eric STREET ADDRESS STREET ADDRESS 308 OLD COLONY RD 135 Marion St. CITY-ST-ZIP CITY-ST-7IP FL 32114 **EDGEWATER FL 32182** Daytona Beach, X Change ☐ Addition TITLE VC ☐ Delete TITLE C MCGRAGE MARK NAME NAME McGrane, Mark STREET ADDRESS STREET ADDRESS 12 SOUTHLAND RAOD 12 Southland Road CITY-ST-ZIP CITY-ST-ZIP ORMOND BEACH FL 32174 Ormond Beach, FL 32174 **₹** Delete ☐ Change Addition TITLE VCD. TITLE STERANOS, TOM NAME NAME **R** Clare, Paul STREET ADDRESS STREET ADDRESS 300 FENTREES BLVD. 1327 N. Highway #1 CITY-ST-ZIP CITY-ST-7IP DAYTONA BEACH FL 32114 Ormond Beach, FL 32174 Addition ☐ Change TITLE Delete TITLE O'Keeffe, Shan NAME MYERS, MIKE NAME 1871 Mason Ave STREET ADDRESS STREET ADDRESS. 4121 S. US HWY #1 Daytona Beach, FL 32117 CITY-ST-ZIP CITY-ST-ZIP EDGEWATER FL 32141 Addition Addition □ Delete TITLE Change THOMPSON, WILLIAM NAME Johnson, Douglas STREET ADDRESS STREET ADDRESS **4620 CITY CENTER DRIVE** 5612 Johnson Lake Rd. DeLeon Springs, FL 32130 CITY-ST-ZIP CITY-ST-ZIP PORT ORANGE FL 32129 PTD ☐ Delete TITLE ☐ Change ☐ Addition NAME FIFER, LOU NAME STREET ADDRESS STREET ADDRESS 3 BLOCKHOUSE CITY-ST-ZIP CITY-ST-ZIP ORMOND BEACH FL 32174 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 design 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