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2001 UNIFORM BUSINESS REPORT (UBR)

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SIGNATURE: 5

Feb 15, 2001 8:00 am DOCUMENT # N98000005928 Secretary of State 1. Entity Name 02-15-2001 90051 012 ****61.25 SHEET METAL WORKERS LOCAL 32 SCHOLARSHIP FUND, I Principal Place of Business Mailing Address 20375 NE 15TH COURT 20375 NE 15TH COURT C0021639 NORTH MIAMI BEACH FL 33179-2709 NORTH MIAMI BEACH FL 33179-2709 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0893068 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 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) STEWART, LARRY 20375 NE 15TH COURT NORTH MIAMI BEACH FL 33179-2709 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. SIGNATURE **FILE NOW:** 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE Addition CRAVEY, JOHN NAME STREET ADDRESS STREET ADDRESS 20375 NE 15TH COURT CITY-ST-ZIP CITY-ST-ZIP NORTH MIAMI BEACH FL 33179-2709 Delete TITLE TITLE ☐ Change Addition BENNETT, EDWARD P NAME NAME STREET ADDRESS STREET ADDRESS 5906 FARRAGUT ST. CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 VD TITLE ☐ Delete TITLE ☐ Change Addition GIORDANO, PAUL NAME NAME STREET ADDRESS 20375 NE 15TH COURT STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP NORTH MIAMI BEACH FL 33179-2709 TITLE STD ☐ Delete TITLE ☐ Change ☐ Addition NAME STATLER, SCOTT NAME STREFT ADDRESS STREET ADDRESS 20375 NE 15TH COURT CITY-ST-ZIP CITY-ST-7IP NORTH MIAMI BEACH FL 33179-2709 TITLE ☐ Delete TITLE ☐ Change Addition NAME STEWART, LARRY NAME STREET ADDRESS STREET ADDRESS 20375 NE 15TH COURT CITY-ST-ZIP CITY-ST-ZIP NORTH MIAMI BEACH FL 33179-2709 TITLE ☐ Delete TITLE ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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