2001 UNIFORM BUSINESS REPORT (UBR) May 04, 2001 8:00 am Secretary of State DOCUMENT # P0000030481 ALLGYER GARAGE DOOR INSTALLATION, INC. 05-04-2001 90055 041 ***150.00 Principal Piace of Business Mailing Address 8209 EIGHT MILE CREEK ROAD 8209 EIGHT MILE CREEK ROAD PENSACOLA FL 32526 PENSACOLA FL 32526 2. Principal Place of Business 3. Mailing Address 7320 IteIms RD. Suite, Apt. #, ctc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 634578 Pensaco/a ensacola Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired United States States United Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent STRUBHAR, BURTON E Street Address (P.O. Box Number is Not Acceptable) 703-5 SOUTH PALAFOX STREET PENSACOLA FL 32501 City 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 · (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE Delete ALLGYER, JASON D NAME NAME 8209 EIGHT MILE CREEK ROAD STREET ADDRESS STREET ADDRESS CITY-ST-7IP PENSACOLA FL 32526 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CiTY-ST-ZIP CHY-S1-ZIP Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS C!TY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete THUS Change Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CRY-ST-ZIP

13. 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 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.

3171.5

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JULY D. COLLY SIGNING OFFICER OR DIRECTOR

4-23-01

(850) 941-0182

Change

☐ Change

Addition

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Daytime ^onon