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2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

Apr 19, 2001 8:00 am Secretary of State DOCUMENT # P0000037391 CASADY'S QUALITY RADIATOR SERVICES, INC. 04-19-2001 90300 007 ***150.00 Principal Place of Business Mailing Address 2410 NUREMBERG BLVD 2230 HWY 70 E BLDG D RM. 9 & 10 ARCADIA FL 34266 PUNTA GORDA FL 33983-2607 532944 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 59-3636635 Not Applicable Zip Country Zin 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 CASADY, JAMES E SR Street Address (P.O. Box Number is Not Acceptable) 2410 NUREMBERG BLVD. PUNTA GORDA FL 33983-2609 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 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. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. President CR2E034 (10/00) TITLE ☐ Delete CASADY, JAMES E SR NAME 2410 Nuremberg Blud. 2410 NUREMBERG BLVD RM. 9 & 10 STREET ADDRESS STREET ADDRESS PUNTA GORDA FL 33983-2609 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE Change Addition CASADY, JOHN R SR NAME NAME 1577 N.E. NOBLES STREET ADDRESS STREET ADDRESS ARCADIA FL 33821 CITY-ST-ZIP CITY-ST-ZIP Vice President John R. Casady, Jr. 830, W. Hickory St. TITLE -TiTLE ---Detete CASADY, JOHN E JR NAME NAME 1577 N.E. NOBLES STREET ADDRESS STREET ADDRESS Arcadia. FL 34266 ARCADIA FL 33821 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE □ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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

President