2003 . **FOR PROFIT CORPORATION**
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # *P00000058320*

1. Entity Name **BARNELL, INC.**

DO NOT WRITE IN THIS SPACE

10075650

2. Principal Place of Business	3. Mailing Address	
1368 ARVNDEL WAY	SAME	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	DO NOT WRITE IN THIS SPACE

City & State	City & State	4. FEI Number	Applied For
BENSALEM, PA		58-2569875	Not Applicable

Zip	Country	Zip	Country	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
19020	USA				

7. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

Name FORBES, PHILIP H. %o BUTZEL LONG P.C.
Street Address (P.O. Box Number is Not Acceptable)
1200 NORTH FEDERAL HIGHWAY
SUITE 420
City BOCA RATON   FL   Zip Code 33432

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Geraldine Y Donnelly*

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		
TITLE DIRECTOR NAME DONNELLY, GERALDINE Y. STREET ADDRESS 1368 ARVNDEL WAY CITY-ST-ZIP BENSALEM PA 19020	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: _*Geraldine Y Donnelly*_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

CR2E034B (12/02)