## FOR PROFIT CORPORATION

## FILED May 03, 2004 8:00 am Secretary of State 05-03-2004 91231 048 \*\*\*158.75

## **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT	#102000006
1. Entity Name	,



Padgett Industries, INC.												
	O NOT WRITE	IN THIS S	PACE							· .		
Principal Place of Business     3. Mailing Address			- D								,,	
10350 Log House Road 10350 Log House Suite, Apt. #, etc Suite, Apt. #, etc.			e Road				DO NOT WRI	TE IN TH	IS SPACI	Ε .	•	
City & State		City & State Clermont, FL				4. FEI Number 01-0575560 Applied For Not Applied						
Zip 34711	Country	Zip 34711	Zip Country				5. Certificate of Status Desired S8.75 Additional Fee Required					
			1 10 7 4 3	<del></del>	7,	Name	and Address of Current	Registe				
				Name Jo	hn M	Pad	gett					
	DO NOT W	Demonstrate and water the state of the first transfer that the state of the state o		Street Addr	ress (P.	O. Box	Number is Not Acceptable	e)				
atrita italia ( 1884) " italia	INTHIS SP	ACE		10350 L	og H	ouse	Road	·				-
			. *		mont			F		ip Code 34711		
8. The above	named entity submits this statemention	r the purpose of changing it	s registered	office or reg	gistered	agent	or both, in the State of Flo	orida. I a			accept	
tile obligati	ons of vegater ayagent	<u> </u>	$\supset_{I}$					. /	1 /			
SIGNATURE _	Signature, typed or printed name of registered agent a	ind title if applicable. (NO	TACC A		equired w	nen reinsta	ding)	4/3 DAT	30/94			
	nugry 1 - May 1 Fee is \$150.00 After May 1, Fee is \$850.00 Amended UBR is \$61.25		<del>,</del>				Election Campaign Fir Trust Fund Contributio	-		\$5.00 M Added to F		•
Make Check 10.	Payable to Florida Department of OFFICERS AND	4.30.1.1.1.1.1			.,,		된 VIST 및 함께 하면 및 번역 및 함께	5 991 31.81	म् अस्य स्टब्स			
AITE .	President / CEO $\mathcal{P}_{i}$	· · · · · · · · · · · · · · · · · · ·	IIILE		<u>al May</u> lar Walanta				36.J B J			(20)
NAME STREET ADDRESS	Bethany M Padgett		NAME:	ADDRESS							n i media	(12)
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STREET ADDRESS	John M Padgett	. =		ADDRESS		ar dige Ar di Ye					en de la companya de	O
CÎTY-ST-ZIP	10350 Log House Rd, Cler	mont, FL 34711	CITY S	T-ZIP	14							
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TITLE			TITLE			<del>30 0 45</del>	2400					
NAME STREET ADDRESS			NAME?				IN THIS	JF#	ハー			
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STREET ADDRESS			STREET	ADDRESS	41.			1 14 31	- 1 P. K	T. F.		
CITY-ST-ZIP	pertify that the information supplied with	this filling does not availed.	CITY-S	1. co	in Cons	ion 110		Lingthon	April to the	at the lefere	307 Sec. 31. 101 .	. F
indicated of the cor attachmer	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee omp nt with an address, with all other tive en	true and accurate and that owered to execute this representations of the second	my signatur ort as requir	re shall have red by Chap	the sal	me lega , Florida	al effect as if made under a Statutes; and that my na	oath; tha ame app	certify that It I am an ears in B	at the inform officer or di lock 10 or o	rector in an	