FILED

Feb 10, 2003 8:00 am Secretary of State 02-10-2003 90451 014 ***150.00

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

DOCUMENT #

P02000035622

1. Entity Name

W.D. WOHLERT, INC.



TITLE PD						WE TOS					
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City & State See The Number of Status Desired See The Propinted	2. Principal	. 114									
Zip Country Zip Country 5. Certificate of Status Desired S8.755 Additional For Required Agent 7. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WOHLERT, WILLIAM D 2885 FOREST RUN DRIVE MELBOURNE F1 2935 City FL 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. I am familiar with, and accept the colligations of registered agent. SIGNATUJE SUMMAR Spriadore Spriador or privited name of registered agent and vive if applicable. (NOTE Registered Agent signature sequend when reinstating) Part PD	Suite, Apt	. #, etc.	Suite	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: