2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

2006 JUL -3 PM 1: 27_____ DOCUMENT # P04000121518 1. Entity Name SECRETAN' OF STATE TALLAHASSEE, FLORIDA EXTRUDERS UNLIMITED, INC. Principal Place of Business Mailing Address 3900 SOUTH FLORIDA AVENUE POST OFFICE BOX 6500 LAKELAND, FL 33807 LAKELAND, FL 33813 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 06282006 Chg-P CR2E034 (11/05) Applied For City & State 4. FEI Number City & State 20-1546779 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HUNTER, STEVEN L Street Address (P.O. Box Number is Not Acceptable) 3900 SOUTH FLORIDA AVENUE LAKELAND, FL 33813 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 obligations of registered agent. SIGNATURE. DATE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Amended AR is \$61.25 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. X Delete ★ Change Addition THLE TITLE NAME JERLA, WILLIAM NAM Pearson, James 7343 BEAUMONT DRIVE STREET ADDRESS STREET ADDRESS 403 East Park Street LAKELAND, FL 33810 CITY-SI-ZIP CITY- ST- 71P Lakeland, FL 33803 X Change Addition TITLE ☐ Delete TITLE VP/D Hunter, Steven L. PEARSON, JAMES NAME NAME STREET ADDRESS STREET ADDRESS 403 EAST PARK STREET 3900 South Florida Ave. C1TY-51-2IP LAKELAND, FL 33803 CITY-ST-ZIP Lakeland, FL 33813 TITLE ☐ Delete TITLE ☐ Change ☐ Addition HUNTER, DENISE M NAME NAME 3900 SOUTH FLORIDA AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY+ST-ZIP LAKELAND, FL 33813 Change ☐ Addition ☐ Delete TODE TITLE HUNTER, STEVEN L NAME NAME 3900 SOUTH FLORIDA AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL 33813 Change Addition TITLE TITLE ☐ Delete NAME NAME 700077086087 STREET ADDRESS STREET ADDRESS 07/06/06--01046--006 **61.25 CITY - ST - ZIP CITY-S1-ZIP Change Addition TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY- S1 - 7IP CITY-S3-ZIP 12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. Hurther 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 ah address, with all other like empowered. recto/ 6/29/06

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