

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 27, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # P93000083205**1. Entity Name  
FLORIDA INDEPENDENT MATERIALS, INC.Principal Place of Business  
122 E. TILLMAN AVENUE  
LAKE WALES FL 33853  
Mailing Address  
PO DRAWER 840  
LAKE WALES FL 3385908402. Principal Place of Business  
202 E. STUART AVENUE3. Mailing Address  
PO DRAWER 840

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
LAKE WALES FLCity & State  
LAKE WALES FL4. FEI Number  
59-3211877Applied For  
Not ApplicableZip Country  
33853 USZip Country  
338590840 US5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required**6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent**JOHNSON RONALD C  
122 E. TILLMAN AVENUE

LAKE WALES FL 33853 US

Name  
JOHNSON RONALD CStreet Address (P.O. Box Number is Not Acceptable)  
202 E. STUART AVENUECity  
LAKE WALES FL Zip Code  
33853

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 \_\_\_\_\_ 04/27/2001  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE STD ☐ Delete  
NAME JOHNSON RONALD C  
STREET ADDRESS 122 E TILLMAN AVE  
CITY-ST-ZIP LAKE WALES FLTITLE STD ☒ Change ☐ Addition  
NAME JOHNSON RONALD C  
STREET ADDRESS 202 E STUART AVE  
CITY-ST-ZIP LAKE WALES FL 33853TITLE PD ☐ Delete  
NAME JAHNA EMIL RIII  
STREET ADDRESS 122 E TILLMAN AVE.  
CITY-ST-ZIP LAKE WALES FLTITLE PD ☒ Change ☐ Addition  
NAME JAHNA EMIL RIII  
STREET ADDRESS 202 E STUART AVE.  
CITY-ST-ZIP LAKE WALES FL 33853TITLE VPD ☐ Delete  
NAME JAHNA JAMES A.  
STREET ADDRESS 122 E. TILLMAN AVENUE  
CITY-ST-ZIP LAKE WALES FLTITLE VPD ☒ Change ☐ Addition  
NAME JAHNA JAMES A  
STREET ADDRESS 202 E. STUART AVENUE  
CITY-ST-ZIP LAKE WALES FL 33853TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
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NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE: RONALD C. JOHNSON**

STD 04/27/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)