2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9400002032

THE MANUFACTURING SOURCE, INC.

5662 FIELDSPRING AVE.

LEAGUE, TERESA T.

5249 EL CERRO DRIVE

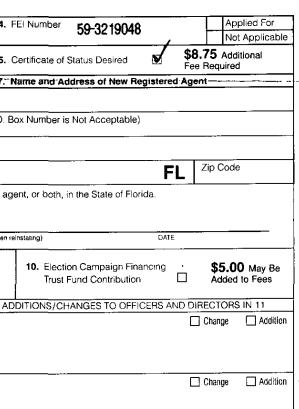
NEW PORT RICHEY FL

NEW PORT RICHEY FL 34655

Principal Place of Business Mailing Address 5662 FIELDSPRING AVE. 5662 FIELDSPRING AVE. NEW PORT RICHEY FL 34655-1100 NEW PORT RICHEY FL 34655 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite Apt # etc. 4. FEI Number City & State City & State 59-3219048 Country Zip Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent-6. Name and Address of Current Registered Agent Name TRACEY, KENNETH F Street Address (P.O. Box Number is Not Acceptable) 5662 FIELDSPRING AVE. **NEW PORT RICHEY FL 34655** 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. DΡ Change ☐ Detete TITLE TITLE TRACEY, KENNETH F NAME 5662 FIELDSPRING AVE. STREET ADDRESS STREET ADDRESS **NEW PORT RICHEY FL 34655** CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change TITLE TITLE TRACEY, LINDA L NAME NAME

Mar 02, 2000 8:00 am Secretary of State

03-02-2000 90045 018 ***158.75



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

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