2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 05, 2001 8:00 am Secretary of State DOCUMENT # **P94000010813** TWO-FOLD WATER ENGINEERING, INC. 03-05-2001 90069 016 ***150.00 Principal Place of Business Mailing Address 282 SE 5TH AVE P.O. BOX 767 MELROSE FL 32666 MELROSE FL 32666 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3229255 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TISDALE, RICHARD M SR. Street Address (P.O. Box Number is Not Acceptable) RT 2 BOX 2943 MELROSE FL 32666 City 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, 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 \$5,00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CR2E034 (10/00) TITLE ☐ Delete TITLE Ρ Change Addition TISDALE, RICHARD M SR. NAME NAME Tisdale, Richard M Sr RT 2 BOX 2943 STREET ADDRESS STREET ADDRESS 282 SE 5th Avenue MELROSE FL 32666 CITY-ST-ZIP CITY-ST-ZIP Melrose, FL 32666 Change Addition TITLE ☐ Delete TITLE VP TISDALE, RICHARD M JR NAME NAME Richard M. Tisdale Jr 495 SW DOVE STREET STREET ADDRESS STREET ACCRESS **KEYSTONE HEIGHTS FL 32656** 6860 Lakeview Rd CITY-ST-ZIP CITY-ST-ZIP Melrose, FL 32666 Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-SY-ZIP C1TY-S3-ZIP

I hereby certify that the information supplied with this filling 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 eath; 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.

Richard M. Tisdale 3/1/01