2000 UNIFORM BUSINESS REPORT (UBR)

Jan 18, 2000 8:00 am Secretary of State DOCUMENT # **P9400063960** 1. Entity Name KILPATRICK TURF EQUIPMENT, INC. 01-18-2000 90062 042 ***158.75 Principal Place of Business Mailing Address 7700 HIGH RIDGE RD 7700 HIGH RIDGE RD BOYNTON BCH FL 33462-5026 BOYNTON BCH FL 33426-9326 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number City & State City & State 65-0522547 Not ----Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name _ STRAWN, JOEL T Street Address (P.O. Box Number is Not Acceptable) 54 N.E. 4TH AVE. **DELRAY BEACH FL 33483** Zip Code FI 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** DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change TITLE TITLE ☐ Delete KILPATRICK, HAROLD D SR NAME NAME STREET ADDRESS 1750 LAKE DR STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DELRAY BEACH FL [] Change SVP TITLE ☐ Delete MORRIS, JOHN R NAME STREET ADDRESS STREET ADDRESS 8541 N. LAKE DASHA DRIVE CITY-ST-ZIP CITY-ST-ZIP PLANTATION FL 33324 Change ☐ Delete TITLE KILPATRICK,-TIM L NAME STREET ADDRESS 1725 LAKE DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DELRAY BEACH FL 33444** ☐ Delete ☐ Change TITLE TITLE KILPATRICK, MARY NAME NAME STREET ADDRESS STREET ADDRESS 1750 LAKE DRIVE CITY-ST-ZIP CITY-ST-ZIP **DELRAY BEACH FL 33444** □ TX Change ☐ Delete TITLE TITLE CALLAHAN, GARRY D NAME NAME 11198 Narragansett Bay Court 6237 LANDSDOWER CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Wellington, Florida 33414 CITY-ST-ZIP **BOYNTON BEACH FL 33437** [] Change AS TITLE TITLE ☐ Delete MORRIS, JOHN R NAME NAME STREET ADDRESS STREET ADDRESS 8541 N LAKE DASHA DR CITY-ST-ZIP CITY-ST-ZIP PLANTATION FL 33324

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 thus ee 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:

FILED