


**FILED**  
**Apr 23, 1999 8:00 am**  
**Secretary of State**

04-23-1999 90220 005 \*\*\*150.00

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> <b>Secretary of State</b> <b>DIVISION OF CORPORATIONS</b>
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**DOCUMENT # P94000086498**

1. Corporation Name  
**WESTEK MANUFACTURING, INC.**

Principal Place of Business

3603 Ventura Drive W.  
 Lakeland, FL 33811

Mailing Address

3603 Ventura Drive W.  
 Lakeland, FL 33811

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/23/1994

4. FEI Number

59-3312080

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
 Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

**\$5.00** May Be  
 Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

☒ Yes☒ No

9. Name and Address of Current Registered Agent

**ERIC W. MUELLER**  
**1800 8TH STREET NW**  
**LAKELAND FL 33805**

10. Name and Address of New Registered Agent

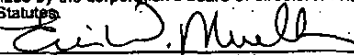
81 Name **Eric Mueller**

82 Street Address (P.O. Box Number is Not Acceptable)

3603 Ventura Drive West

84 City **Lakeland****FL**85 Zip Code **33811**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE **ERIC W. MUELLER PRESIDENT**


DATE

12. OFFICERS AND DIRECTORS

TITLE	<b>P</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>ERIC W. MUELLER</b>	
STREET ADDRESS	<b>3603 VENTURA DRIVE W.</b>	
CITY-ST-ZIP	<b>LAKELAND FL 33811</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<b>President</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>Eric Mueller</b>	
1.3 STREET ADDRESS	<b>3603 Ventura Drive West</b>	
1.4 CITY-ST-ZIP	<b>Lakeland, FL 33811</b>	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:



4/5/99

Date

9416196200

Daytime Phone #

CR2E034 (4/1/98)