

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000086274

FILED
Apr 23, 2001 8:00 AM
Secretary of State

Entity Name: LANDMANN MANUFACTURING INC.

Current Principal Place of Business:

2301 NORTH ALBANY AVE.
TAMPA, FL 33607 US

New Principal Place of Business:

Current Mailing Address:

1624 S. CHESTNUT AVE.
BROKEN ARROW, OK 74012 US

New Mailing Address:

15423 BLACK BIRCH DR.
CHESTERFIELD, MO 63017 US

FEI Number: 59-3363333

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUENTNER, KARL W
599 DOLLY BAY DR.
T-308
PALM HARBOR, FL 34664

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: LANDMANN, HOWARD
Address: 1624 S. CHESTNUT AVE.
City-St-Zip: BROKEN ARROW, OK 74012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change () Addition
Name: LANDMANN, HOWARD PRESIDE
Address: 15423 BLACK BIRCH DR.
City-St-Zip: CHESTERFIELD, MO 63017

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HOWARD LANDMANN

PRES

04/23/2001

Electronic Signature of Signing Officer or Director

Date