FILED

2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Apr 16, 2003 8:00 am Secretary of State P96000053910 DOCUMENT # 04-16-2003 90271 005 ***150.00 1. Entity Name GUNN'S SPECIALTY GLASS, INC. Principal Place of Business Mailing Address 21 N. LOXAHATCHEE DRIVE 21 N. LOXAHATCHEE DRIVE JUPITER FL 33458 JUPITER FL 33458 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State Applied For City & State 4. FE! Number 65-0691760 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BLANEY, JERRI M Street Address (P.O. Box Number is Not Acceptable) 11380 PROSPERITY FARMS ROAD, SUITE 203 PALM BEACH GARDENS FL 33410 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. I am familiar with, and accept the obligations of registered agent. SIGNATURÉ Signature, typed or printed name of registered agent and title it applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State | OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME GUNN, KEVIN NAME STREET ADDRESS **80 PINEHILL TRAIL EAST** STREET ADDRESS **TEQUESTA FL 33469** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition **GUNN, CHRISTOPHER** NAME NAME 50 WOODLAND DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **TEQUESTA FL 33469** CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change **GUNN, ANN** NAME NAME STREET ADDRESS 50 WOODLAND DRIVE STREET ADDRESS CITY-ST-ZIP TEQUESTA FL 33469 CITY-ST-ZIP TITLE ☐ Delete TITLE Addition ☐ Channe **GUNN, ELIZABETH** NAME NAME STREET ADDRESS **80 PINEHILL TRAIL EAST** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Tequesta FL 33469 TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ED OR PRINTED NAME OF SIGN