

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

**FILED**  
**Feb 21, 2003 8:00 am**  
**Secretary of State**

02-21-2003 90213 043 \*\*\*150.00

**DOCUMENT # P97000026729**

1. Entity Name  
**SECTRON, INC.**



Principal Place of Business  
**37243 SUNRISE TERR.  
UMATILLA FL 32784**

Mailing Address  
**PO BOX 231  
EUSTIS FL 32727  
US**



2. Principal Place of Business  
**66 W. SEMINOLE AVE.**

3. Mailing Address  
**P.O. BOX 790**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State  
**EUSTIS, FL**

City & State  
**EUSTIS, FL**

4. FEI Number  
**59-3435456**

Applied For  
☐ Not Applicable

Zip  
**32726**

Country

Zip  
**32727-0790**

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**HOLTZCLAW, ERIC H  
37243 SUNRISE TERR.  
UMATILLA FL 32784**

**7. Name and Address of New Registered Agent**

Name  
**ERIC H. HOLTZCLAW**

Street Address (P.O. Box Number is Not Acceptable)  
**66 W. SEMINOLE AVE.**

City  
**EUSTIS** **FL** Zip Code  
**32726**

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.

SIGNATURE **SAME**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
HOLTZCLAW, ERIC H  
37243 SUNRISE TERR.  
UMATILLA FL 32784** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
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TITLE  
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STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**HOLTZCLAW, ERIC H.  
66 W. SEMINOLE AVE.  
EUSTIS, FL 32726** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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CITY-ST-ZIP  
☐ Change ☐ Addition

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NAME  
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CITY-ST-ZIP  
☐ Change ☐ Addition

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:

**ERIC H. HOLTZCLAW**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2-4-03**

Date

**(352) 589-0449**

Daytime Phone #

CR2E034 (10/02)