FILED

2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachme

May 29, 2002 8:00 am Secretary of State P97000031523 DOCUMENT # 04-16-2002 90207 001 ***300.00 1. Entity Name SENSIBLE AUTOMOTIVE, INC. Mailing Address Principal Place of Business 5007 DENVER ST 5007 DENVER ST **TAMPA FL 33819 TAMPA FL 33619** 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3567954 Not Applicable Zip Country \$8.75 Additional Żip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent STEBBINS, CHRISTOPHER M Street Address (P.O. Box Number is Not Acceptable) 3705 COPPERTREE CIRCLE BRANDON FL 33511 Zip Code City 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 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 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12 11. CR2E034 (9/01' ☐ Change Addition VICE Pres Delete TITLE TITLE MAME NAME FRUEH, HENRY M STREET ADDRESS 3321 KING CHARLES CIR STREET ADDRESS CITY-ST-ZIP CITY-ST-7IE SEFFNER FL 33584 ☐ Addition ☐ Delete ELEC V. Pres. ☑ Change D STEBBINS, CHRISTOPHER M TITLE NAME NAME 4203 Springway cir STREET ADDRESS STREET ADDRESS 3705 COPPERTREE CIRCLE CITY-ST-ZIP **BRANDON FL 33511** CITY-ST-ZIP General Manager BOARD SECRETORY Change ☐ Addition TITLE ☐ Delete quert in StEBBins 3705 COPPEX STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Branden *3*3< // ☐ Addition TITLE Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition MILE TITLE ☐ Delete NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

K.M.STEBBWS, TI

BOARD