2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachma

Mar 07, 2002 8:00 am Secretary of State DOCUMENT # P97000100970 1. Entity Name FISHER ELECTRIC TECHNOLOGY, INC. 03-07-2002 90061 025 ***150.00 Principal Place of Business Mailing Address 2800 ANVIL ST. 2801 72ND ST SAINT PETERSBURG FL 33710 , ST PETERSBURG FL 33710 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3485624 Not Applicable Zip Country 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 Name PREIS, NANCY J Street Address (P.O. Box Number is Not Acceptable) 2800 ANVIL ST. ST PETERSBURG FL 33710 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NQTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE ☐ Addition ☐ Delete PREIS, NANCY J NAME NAME STREET ADDRESS 2800 ANVIL ST STREET ADDRESS SAINT PETERSBURG FL 33710 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE Delete TITLE ☐ Change NAME NAME HORBAL, DR RICHARD STREET ADDRESS STREET ADDRESS 1415 CENTER AVE C-108 CITY-ST-ZIP ESSEXVILLE MI 48732 CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE □ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS 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

FILED