AMENDED

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 NOV 17 AM 8:00

DOCUMENT # P99000041846

1. Entity Name
GOLDEN MANUFACTURING, INC.

Principal Place of Business	Mailing Address
3587 PALMETTO AVE FT. MYERS FL 33916	3587 PALMETTO AVE FT. MYERS FL 33916

2. Principal Place of Business	3. Mailing Address
3587 Veronicas Shoemaker Blvd Suite, Apt. #, etc.	3587 Veronicas Shoemaker Blvd Suite, Apt. #, etc.
City & State: FT Myers Fl	City & State: FT Myers Fl
Zip: 33916 Country: USA	Zip: 33916 Country: USA

☒ CHECK HERE IF MAKING CHANGES MRS

4. FEI Number 65-0921885 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GOLDEN, WILLIAM<br~~3587 PALMETTO AVE~~ 3587 Veronica S. Shoemaker Blvd FT. MYERS FL 33916	Name Street Address (P.O. Box Number is Not Acceptable) City FL 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.

SIGNATURE [signature] 11-5-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DPVS GOLDEN, WILLIAM 4810 HIGGINBOTHAM ROAD FT. MYERS FL 33905	☐ Delete	PD Golden William 4810 Higginbotham Rd Ft Myers Fl. 33905	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GOLDEN, WILLIAM 4810 HIGGINBOTHAM ROAD FT. MYERS FL 33905	☒ Delete	V Diaz Pete 16160 Forest Glen Court Punta Gorda Fl. 33982	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TS Smolinka, John 1213 NE 3rd Street Cape Coral Fl 33908	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	100021739201 11/17/03 01015-002 **61.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ 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: [signature] 11-5-03 239-337-4141
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #