2000 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 06, 2000 8:00 am Secretary of State DOCUMENT # **P99000042040** MOORE FIRE PROTECTION, INC. 03-06-2000 90106 022 ***158.75 Principal Place of Business Mailing Address 5400 GUILDCREST STREET 5400 GUILDCREST STREET LAKE WORTH FL 33463 LAKE WORTH FL 33463-5808 2. Principal Place of Business 3. Mailing Address 4897 Jog Road <u>4897 Joa Road</u> DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc Suite, Apt. #, etc. Suite 118 Suite 118 Applied For City & State 4. FEI Number City & State Not Applicable Lake Worth, Lake-Worth FL 65-0917825 Zip Country Country \$8.75 Additional 5. Certificate of Status Desired XX 33467 Palm Beach 33467 Palm Beach Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE CORAL GABLES FL 33134 Zip Code City FL 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) DATE 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, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. 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 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition PTD Delete TITLE TITLE MOORE, PATRICK M NAME NAME_ STREET ADDRESS STREET ADDRESS 5400 GUILDCREST STREET CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH FL 33463 ☐ Change ☐ Addition ☐ Delete TITLE NAME MOORE, CATHERINE F NAME STREET ADDRESS 5400 GUILDCREST STREET STREET ADDRESS LAKE WORTH FL 33463 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change **XX**Addition TITLE **VP** NAME NAME Howard Walter STREET ADDRESS STREET ADDRESS 1357 Riverland Road CITY-ST-ZIP Ft. Lauderdale, FL 33312 CITY-ST-7IP Change ☐ Addition TITI F ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □.Change - □ Addition. TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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

SIGNATURE: Moore,

Secretary

changed, or on an attachment with an address, with all other like empowered

Catherine