FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Jan 16, 2001 8:00 am DOCUMENT # P9900060259 **Secretary of State** 1. Entity Name HELDRETH EQUIPMENT COMPANY, INC. 01-16-2001 90001 005 ***150.00 Principal Place of Business Mailing Address 994 E. CAROLL ST., #12 994 E. CAROLL ST., #12 KISSIMMEE FL 34744 KISSIMMEE FL 34744 601396 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3589883 Not Applicable \$8.75 Additional Zip Country Zio Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent STEPHAN, THOMAS L Street Address (P.O. Box Number is Not Acceptable) 251 MAITLAND AVE., SUITE 302 **ALTAMONTE SPRINGS FL 32701** 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. (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, 2001 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 11. ☐ Delete TITLE TITLE HELDRETH, RODNEY B NAME NAME STREET ADDRESS STREET ADDRESS 994 E. CAROLL ST., #12 CITY-ST-ZIP CITY-ST-ZIP KISSIMMEE FL 34744 ☐ Addition ☐ Change ☐ Delete TITLE TITLE HELDRETH, RODNEY B NAME NAME STREET ADDRESS 994 E. CAROLL ST., #12 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP --KISSIMMEE FL-34744 ---- --☐ Channe ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE 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 changed, or on an attachment with an address, with all other like empowered. Rodney B Heldreth 1401 407-847-6426