FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Jan 16, 2002 8:00 am Secretary of State DOCUMENT # P99000079837 1. Entity Name 01-16-2002 90003 014 ***150.00 TEXBAY INDUSTRIES, INC. Principal Place of Business Mailing Address 5500 VINCI CIRCLE 5500 VINCI CIRCLE SARASOTA FL 34243-2611 SARASOTA FL 34243-2611 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0948907 Not Applicable Zip Country Country, ... \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BECK, CHARLES S Street Address (P.O. Box Number is Not Acceptable) 5500 VINCI CIRCLE SARASOTA FL 34243-2611 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 (NOTE: 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE CR2E034 (9/01) ☐ Delete TITLE Change Addition-FRITZMAN, RAIPH NAME NAME Fritsman, Ralph STREET ADDRESS 3743 Collins St STREET ADDRESS 2613 GOLDENROD ST CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34239 SANASOTA FI 3423 ☐ Delete TITLE Change TD Addition BECK, CHARLES S. 5500 VINCE CIACLE NAME NAME BACK, CHARLES S STREET ADDRESS STREET ADDRESS 5500 VINCI CIR CITY-ST-ZIP. CITY-ST-ZIP SANASOTA-F1-34243 SARASOTA-FL-34243-☐ Delete TITLE Change Addition BURDMAN, ROSEANN NAME BARDMAN, ROSEANN 5500 Viva Cinde STREET ADDRESS STREET ADDRESS 5500 VINCI CIR CITY-ST-ZIP CITY-ST-ZIP SANASOTA FI 34643 <u>Sarasota FL 34243</u> TITLE ☐ 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 TITLE ☐ Delete ☐ 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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF