2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED **DOCUMENT # S09276** Jul 21, 2000 8:00 am 1. Entity Name LOOMIS GRAPHICS. INC. **Secretary of State** 07-21-2000 90150 005 ***550.00 Mailing Address Principal Place of Business 13900 49TH ST. N. 13900 49TH ST. N. **CLEARWATER FL 33762-3739** CLEARWATER FL 33762-3739 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 59-3024156 56-3026156 Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SMITH, DARRELL C. Street Address (P.O. Box Number is Not Acceptable) 101 EAST KENNEDY BLVD. **SUITE 2800** TAMPA FL 33672-0609 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 DATE 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, 2000 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 12. 11. ☐ Change Addition PD □ Delete TITLE TITLE LOOMIS, MARC D. NAME NAME STREET ADDRESS STREET ADDRESS 13900 49TH ST. N. CITY-ST-ZIP CITY-ST-ZIP **CLEARWATER FL 33762** ☐ Change ☐ Addition ☐ Delete TITLE TITLE **BOWERSOCK, WILLIAM** NAME STREET ADDRESS 13900 NORTH 49TH STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 33762-3739 ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDR STREET ADDRESS CITY-SI-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.





July 11, 2000

Florida Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Attn: Reinstatements

To Whom It May Concern:

We have recently discovered that our Uniform Business Report has an incorrect FEI number. The number of 56-3026156 has been in error since 1990. The correct number is 59-3026156. You will see that all of our state and federal tax forms have been filed under the correct number.

Please change your records to reflect our correct FEI number. Thank you for your assistance in this matter.

Sincerely,

Heidi D. Burg, CPA
Corporate Controller