2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # \$40658 Apr 18, 2000 8:00 am Secretary of State 1. Entity Name J. M. STEWART INDUSTRIES, INC. 04-18-2000 90001 013 ***150.00 Principal Place of Business Mailing Address 5029 EDGEWATER DRIVE 1705 CATTLEMAN RD ORLANDO FL 32810-5226 UNIT \$-15 SARASOTA FL 34232 835388 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0258763 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7: Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HARRIS, MARSHALL S Street Address (P.O. Box Number is Not Acceptable) **5029 EDGEWATER DRIVE** ORLANDO FL 32810 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 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. PD V/T/D Addition ☐ Delete TITLE TITLE Thrasher, Todd D. STEWART, J. ME.VIN NAME NAME 5029 Edgewater Drive 2201 CANTU CT. STREET ADDRESS STREET ADDRESS Orlando, FL 32810 CITY-ST-ZIP SARASOTA FL CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE SCHAETZEL, PAMELA NAME NAME STREET ADDRESS 2201 CANTU CT., STE. 217 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE SARASOTA FL 34232 Change ☐ Addition TITLE ☐ Delete ~~~ TITLE **TODD THRASHER** NAME NAME STREET ADDRESS **5029 EDGEWATER DRIVE** STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32810 CITY-ST-7IP ☐ Change ☐ Addition TITLE TITLE ☐ Delete BRANDNER, J. WILLIAM NAME NAME STREET ADDRESS **5029 EDGEWATER DRIVE** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32810 Change ☐ Addition ☐ Delete TITLE HARRIS, MARSHALL S NAME STREET ADDRESS **5029 EDGEWATER DRIVE** STREET ADDRESS ORLANDO FL 32810 CITY-ST-7IP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-7IP

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