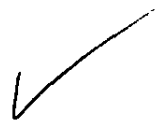


2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S60940

1. Entity Name

ROCKWELL ENTERPRISES, INC.



Amended
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 MAY 22 PM 12:33

Principal Place of Business

5827 17 ST E
UNIT G3
BRADENTON FL 34202
US

Mailing Address

P O BOX 1235
ONECO FL 34264
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0265774

Applied For

Not Applicable

Zip
34203

Country

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROCKWELL THOMAS J.
23004 71ST AVE E
BRADENTON FL 34202

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 see if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	DP	☐ Delete
NAME	ROCKWELL THOMAS J.	
STREET ADDRESS	23004 71ST AVE E	
CITY-ST-ZIP	BRADENTON FL	
TITLE	VP	☒ Delete
NAME	HAGEN, MARLEN J	
STREET ADDRESS	PO BOX 1235	
CITY-ST-ZIP	ONECO FL	
TITLE	VP	☒ Delete
NAME	CLARK, JOHN	
STREET ADDRESS	5381 JIM DAVIS ROAD	
CITY-ST-ZIP	PARRISH FL 34219	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	V.P.	☐ Change ☒ Addition
NAME	Joshua D. Wynne	
STREET ADDRESS	2595 Feiffer Circle	
CITY-ST-ZIP	Sarasota, FL 34235	
TITLE	VP	☐ Change ☒ Addition
NAME	Scott Helmich	
STREET ADDRESS	4809 Ft Hammir Rd	
CITY-ST-ZIP	Parrish FL 34219	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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 or changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Tom Rockwell
SIGNATURE AND TYPED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/01

941.752.1466

Date

Daytime Phone

CR2E034 (1/0/00)