

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000078065

**Entity Name:** UNIVERSAL FORMING INC

**Current Principal Place of Business:**

2461 WEST STATE ROAD 426  
SUITE 1041  
OVIEDO, FL 32765

**Current Mailing Address:**

2461 WEST STATE ROAD 426  
SUITE 1041  
OVIEDO, FL 32765 US

**FEI Number:** 20-2912227

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

VOLHEIM, TODD  
2461 WEST STATE ROAD 426  
SUITE 1041  
OVIEDO, FL 32765 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

|                 |                    |                 |                        |
|-----------------|--------------------|-----------------|------------------------|
| Title           | P                  | Title           | VP                     |
| Name            | VOLHEIM, TODD      | Name            | NAGELE, WILLIAM        |
| Address         | 765 SUMMER OAKS CT | Address         | 20808 NETTLETON STREET |
| City-State-Zip: | OVIEDO FL 32765    | City-State-Zip: | ORLANDO FL 32833       |

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** TODD VOLHEIM

**PRESIDENT**

**01/12/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date