

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2000 8:00 am
Secretary of State

04-21-2000 90144 012 ***150.00

DOCUMENT # 218174
 1. Entity Name
ASTOR PRODUCTS, INC.

Principal Place of Business 5244 EDGEWOOD CT JACKSONVILLE FL 32254 US	Mailing Address 5050 EDGEWOOD COURT JACKSONVILLE FLA 32254-3601 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-0858632	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
E ELLIS ZAHRA, JR
5050 EDGEWOOD CT
JACKSONVILLE FL 32254

7. Name and Address of New Registered Agent
 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KUFELDT, JAMES 5050 EDGEWOOD COURT JACKSONVILLE, FL 00000	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Rowland, A. R. 5050 Edgewood Court Jacksonville, FL 32254	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BRAGIN, D H 5050 EDGEWOOD COURT JACKSONVILLE, FL 00000	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MCCOOK, R P 5050 EDGEWOOD COURT JACKSONVILLE, FL 00000	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DIXON, J.W. 5050 EDGEWOOD COURT JACKSONVILLE FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: T. L. Qualls **4/10/2000** **904-783-5429**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 19/99

2/8/14

641731

SCHEDULE 1

ASTOR PRODUCTS, INC.

59-0858632

FISCAL YEAR ENDED JUNE 28, 2000

OFFICER	SS#	TITLE	ADDRESS
BROCATO, R. J.	434-62-1014	VICE PRESIDENT	5050 EDGEWOOD COURT, JACKSONVILLE, FL 32254
BERRY, W. M.	546-86-8789	VICE PRESIDENT	5050 EDGEWOOD COURT, JACKSONVILLE, FL 32254
ROWLAND, A. R.	522-54-6341	DIRECTOR AND PRESIDENT	5050 EDGEWOOD COURT, JACKSONVILLE, FL 32254
MAY, L. H.	265-72-3994	VICE PRESIDENT	5050 EDGEWOOD COURT, JACKSONVILLE, FL 32254
MCCOOK, R. P.	266-08-9566	VICE PRESIDENT	5050 EDGEWOOD COURT, JACKSONVILLE, FL 32254
ZAHRA, E. E. JR.	261-78-6472	VICE PRESIDENT & ASST. SECY.	5050 EDGEWOOD COURT, JACKSONVILLE, FL 32254
DIXON, J. W.	264-62-6590	SECRETARY	5050 EDGEWOOD COURT, JACKSONVILLE, FL 32254
BRAGIN, D. H.	267-64-3841	DIRECTOR, TREASURER AND ASST. SECY	5050 EDGEWOOD COURT, JACKSONVILLE, FL 32254
MOORE, M. P.	266-64-9383	ASST. SECRETARY AND ASST. TREASURER	5050 EDGEWOOD COURT, JACKSONVILLE, FL 32254
PETERSON, R. D.	506-52-1816	ASST. SECRETARY AND ASST. TREASURER	5050 EDGEWOOD COURT, JACKSONVILLE, FL 32254
QUALLS, T. L.	449-66-6537	ASST. SECRETARY AND ASST. TREASURER	5050 EDGEWOOD COURT, JACKSONVILLE, FL 32254