FILED

## 2001 UNIFORM BUSINESS REPORT (UBR)

## Apr 09, 2001 8:00 am Secretary of State **DOCUMENT #826385** 1. Entity Name CORDANT TECHNOLOGIES INC. 4-09-2001 90002 021 \*\*\*150.00 Principal Place of Business Mailing Address 15 W. SOUTH TEMPLE 15 W. SOUTH TEMPLE STE 1600 STE 1600 819330 SALT LAKE CITY UT 8401-532 SALT LAKE CITY UT 8401-532 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 36-2678716 Not Applicable Zip Country Zip Country \$8.75 Additional Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code FL 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 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 Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. PDC **⊡** Delete President Change ☐ Addition TITLE TITLE WILSON, JAMES R. Patrick NAME NAME 15 W. SOUTH TEMPLE STREET ADDRESS STREET ADDRESS remple CITY-ST-ZIP SALT LAKE CITY UT 84101 CITY-ST-ZIP secretary Change Delete ☐ Addition TITLE TITLE NORTH, EDWIN M. Donna C. NAME NAMÉ 15 W. SOUTH TEMPLE 6603 West STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SALT LAKE CITY UT 8401 chmcmdAT ----· 🖾 Change TITLE TITLE reasurer ☐ Addition -CHERECWICH, PAUL JR. NAME NAME William 15 W. SOUTH TEMPLE STREET ADDRESS STREET ADDRESS Isabella CITY-ST-7IP SALT LAKE CITY UT 84101 CITY-ST-ZIP TITLE TITLE ☐ Addition CORBIN, R L NAME NAME 15 W. SOUTH TEMPLE STREET ADDRESS STREET ADDRESS Isabella St. CITY-ST-ZIP SALT LAKE CITY UT 84101 CITY-ST-ZIP 72319 ☑ Delete TITLE Change TITLE Addition MCNULTY, J E NAME NAME Ronald STREET ADDRESS 15 W. SOUTH TEMPLE STREET ADDRESS 201, Isabella St. CITY-ST-ZIP SALT LAKE CITY UT 84101 CITY-ST-7IP TITLE Delete ☐ Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-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.

SIGNATURE:

MM LOLLIK Ronald D. Dicke

330/01

Daytime Phone #