

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 03, 2000 8:00 am**  
**Secretary of State**

04-03-2000 90004 016 \*\*\*150.00

**DOCUMENT # 830125**

1. Entity Name

**WHITE MOUNTAINS SERVICES CORPORATION**

Principal Place of Business

Mailing Address

27555 FARMINGTON ROAD  
 P.O. BOX 1800  
 FARMINGTON HILLS MI 48334-3357  
 US

27555 FARMINGTON ROAD  
 ATTN: DEPT 01-111  
 FARMINGTON HILLS MI 48334-3314  
 US

2. Principal Place of Business

80 S. Main St.

Suite, Apt. #, etc.

3. Mailing Address

same change

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Hanover, NH

City & State

4. FEI Number

38-2011419

Applied For

Not Applicable

Zip

03755

Country

USA

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
 1200 S. PINE ISLAND ROAD  
 PLANTATION FL 33324

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

N/A

Signature, typed or printed name of registered agent and title if applicable.

(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)

**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.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
CFOS	ALLEMANG, MICHAEL C	3475 RIDGELINE COURT	ANN ARBOR MI	<input type="checkbox"/>
EVP	JANSSEN, MARK A.	5630 INVERRARY	MILFORD MI	<input checked="" type="checkbox"/>
EVP	DENSMORE, ROBERT R.	35333 STRATTON HILL CT.	FRAMINGTON HILLS MI	<input checked="" type="checkbox"/>
VP	CAIN, MELINDA F	17389 ROLLING WOODS CIRCLE	NORTHVILLE MI	<input checked="" type="checkbox"/>
P	MOHAN, FRANCIS	26 TREETOP	POUGHKEEPSIE NY 12603	<input checked="" type="checkbox"/>
AVP	KELLEY, LILLIAN	27555 FARMINGTON RD	FARMINGTON HILLS MI 48334	<input checked="" type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
CFOS	Allemand, Michael C.	80 E. Main St.	Hanover, NH 03755	<input checked="" type="checkbox"/>	<input type="checkbox"/>
EVP	Allemand, Michael C.	80 S. Main St.	Hanover, NH 03755	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VP	Copple, David	80 S. Main St.	Hanover, NH 03755	<input type="checkbox"/>	<input checked="" type="checkbox"/>
P	Paquette, Michael S.	80 E. Main St.	Hanover, NH 03755	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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 titles empowered.

SIGNATURE:

*[Signature]*  
 MICHAEL C. ALLEMAND  
 REGISTERED AGENT

3/23/00

Date

603-640-2221

Daytime Phone #