

# 2001 UNIFORM BUSINESS REPORT (UBR)

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**FILED**  
**May 07, 2001 8:00 am**  
**Secretary of State**

05-07-2001 90007 045 \*\*\*150.00


**DOCUMENT # 838762**

1. Entity Name  
**CANDLE CORPORATION OF AMERICA**

Principal Place of Business <b>999 E. TOUHY          STE. #450          DES PLAINES IL 60018          US</b>	Mailing Address <b>999 E. TOUHY          STE. #450          DES PLAINES IL 60018          US</b>
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number <b>11-1434610</b>	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM  
 1240 SOUTH PINE ISLAND RD  
 FORT LAUDERDALE 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 \_\_\_\_\_  
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, 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 NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>ROSE, HOWARD</b> <b>999 E TOUHY AVE</b> <b>DES PLAINES IL 60018</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>BROWNING, RICHARD</b> <b>100 FIELD POINT RD -</b> <b>GREENWICH CT 06830</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>GOERGEN, BOB</b> <b>100 FIELD POINT RD -</b> <b>GREENWICH CT 06830</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>LAFORGE, ELWOND L</b> <b>100 FIELD PT RD -</b> <b>GREENWICH CT 06830</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>KREIGER, BRUCE D</b> <b>100 FIELD PT RD -</b> <b>GREENWICH CT 06830</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CFO</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
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"/> Change <input type="checkbox"/> Addition
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"/> 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: *Bruce D Kreiger* **BRUCE D KREIGER** **4/25/01**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

*Attachment*

Doc # 838762

756755

**CANDLE CORPORATION OF AMERICA**

FEIN: 11-1434610

List of Directors

Title	Name	Business Address	Expiration of Term
Directors	Robert B. Goergen	1 East Weaver Street, Greenwich, CT 06830	June, 2001
	Richard T. Browning	1 East Weaver Street, Greenwich, CT 06830	June, 2001
	Bruce D. Kreiger	1 East Weaver Street, Greenwich, CT 06830	June, 2001
	Elwood L LaForge	1 East Weaver Street, Greenwich, CT 06830	June, 2001

**CANDLE CORPORATION OF AMERICA**

FEIN: 11-1434610

List of Officers

Title	Name	Business Address	Expiration of Term
Chairman of the Board	Richard B. Goergen	1 East Weaver Street, Greenwich, CT 06830	June, 2001
President	Elwood L LaForge, Jr.	1 East Weaver Street, Greenwich, CT 06830	June, 2001
Pres., CCA Retail/GM	James E. Kopp	1 East Weaver Street, Greenwich, CT 06830	June, 2001
VP - Treasurer	Richard T. Browning	1 East Weaver Street, Greenwich, CT 06830	June, 2001
VP - Gen. Counsel & Sec.	Bruce D. Kreiger	1 East Weaver Street, Greenwich, CT 06830	June, 2001
VP	William Adler	1 East Weaver Street, Greenwich, CT 06830	June, 2001
VP	Joseph T. Fahey	1 East Weaver Street, Greenwich, CT 06830	June, 2001
VP	Jose Garcia	1 East Weaver Street, Greenwich, CT 06830	June, 2001
VP	Paul Friert	1 East Weaver Street, Greenwich, CT 06830	June, 2001
VP	Garry Schermann	1 East Weaver Street, Greenwich, CT 06830	June, 2001
VP	M. Ruben Platas	1 East Weaver Street, Greenwich, CT 06830	June, 2001