2
3
8
₽

FILED

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

Aug 31, 2001 8:00 am Secretary of State **DOCUMENT #** F00000007272 1. Entity Name 08-31-2001 90238 026 ***550.00 PEPC INC. Principal Place of Business Mailing Address 400 BELLEVUE PARKWAY 400 BELLEVUE PARKWAY WILMINGTON DE 19809 WILMINGTON DE 19809 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State -04-3179504· 287 1943 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 ✓ 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 September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE PCFO TITLE ☐ Change ☐ Addition (5/01 ☐ Delete CARNALL, J. RICHARD NAME NAME 400 BELLEVUE PARKWAY STREET ADDRESS CR2E034 STREET ADDRESS CITY-ST-ZIP WILMINGTON DE 19809 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition ANDALORO, JOHN J NAME NAME STREET ADDRESS **400 BELLEVUE PARKWAY** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **WILMINGTON DE 19809** :Change _ _ ... Addition TITLE Delete TITLE NAME WYNNE, STEPHEN M NAME STREET ADDRESS STREET ADDRESS 400 BELLEVUE PARKWAY CITY-ST-ZIP WILMINGTON DE 19809 CITY-ST-ZIP TITLE ☐ Delete ☐ Addition TITLE Change NAME **BURTON, CLAYTON H III** STREET ADDRESS **400 BELLEVUE PARKWAY** STREET ADDRESS CITY-ST-7IP WILMINGTON DE 19809 CITY-ST-7IP TITLE TITLE ☐ Change ■ Delete Addition Dougles D Castagna Hoo Bellevie Parkina NAME MILEY, SUSAN S NAME STREET ADDRESS 400 BELLEVUE PARKWAY STREET ADDRESS Vilouington DE CITY-ST-ZIP WILMINGTON DE 19809 CITY-ST-ZIP 1980 TITI F TITLE ☐ Delete Change ☐ Addition PERLSWEIG, ROBERT J NAME NAME STREET ADDRESS STREET ADDRESS **400 BELLEVUE PARKWAY** CITY-ST-ZIP **WILMINGTON DE 19809** 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 be 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.