

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 06, 2002 8:00 am
Secretary of State

08-06-2002 90129 004 ***150.00

DOCUMENT # F01000003249

1. Entity Name
CRS RETAIL SYSTEMS, INC.

Principal Place of Business

15 GOVERNOR DRIVE
NEWBURGH NY 12550

Mailing Address

15 GOVERNOR DRIVE
NEWBURGH NY 12550

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

14-1624962

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH 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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 **PD** ☐ Delete
NAME **FROMMER, KATHY**
STREET ADDRESS **15 GOVERNOR DRIVE**
CITY-ST-ZIP **NEWBURGH NY 12550**

TITLE **STD** ☐ Delete
NAME **FROMMER, DONALD**
STREET ADDRESS **15 GOVERNOR DRIVE**
CITY-ST-ZIP **NEWBURGH NY 12550**

TITLE **V** ☐ Delete
NAME **SWANWICK, KEVIN**
STREET ADDRESS **15 GOVERNOR DRIVE**
CITY-ST-ZIP **NEWBURGH NY 12550**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CR2E034 (4/02)

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/25/02

845-567-1234
Daytime Phone #



Attachment
Dr. # Fo 1000003249
676397

July 25, 2002

Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Division of Corporations,

CRS Retail Systems, Inc. became authorized to transact business in Florida on June 19, 2001. Due to unknown reasons, we never received our 1st notice concerning our January "Annual Report". We therefore respectfully request a waiver of the \$400.00 late fee associated with the second notice. Please accept payment in full of \$150.00 for our "2002 Uniform Business Report".

Respectfully yours,

Donald Frommer
Secretary
CRS Retail Systems, Inc.