

2001 UNIFORM BUSINESS REPORT (UBR)

4/1

FILED
May 17, 2001 8:00 am
Secretary of State

04-11-2001 90052 003 ***150.00

DOCUMENT # J47331

1. Entity Name
BOCA BRUSH & CHEMICAL, INC.

Principal Place of Business 333 HOLLENBECK ST. P O BOX 1515 ROCHESTER NY 14603	Mailing Address 333 HOLLENBECK ST. P O BOX 1515 ROCHESTER NY 14603
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2. Principal Place of Business 333 Hollenbeck St Suite, Apt. #, etc.	3. Mailing Address PO Box 31515 Suite, Apt. #, etc.
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City & State Rochester NY	City & State Rochester NY
Zip 14621	Country USA
Zip 14603	Country USA

4. FEI Number 06-1196055	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
~~GARBER, MEL~~ *delete ← not updated correctly from last year*
CT CORPORATION SYSTEMS
1200 S PINE ISLAND RD
PLANTATION FL 33324

7. Name and Address of New Registered Agent
 Name: **CT Corporation System**
 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: *K.A.S.* **Kevin A. Sebnia, Assistant Secretary** 4/30/01
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	VP LUTHRO, JOHN 1240 STOCKWIDGE RD WEBSTER NY 14580 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD SLOAN, DALE 31 MODE LANE ROCHESTER NY <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S INGERSOLL, MARY K 41 OLD COUNTRY LANE FAIRPORT NY <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CALKINS, H.D. 105 COUNTRY CLUB DRIVE ROCHESTER NY <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C MILLER, D. M. 19 KATHRENE CT. WEBSTER NY <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	V Enes, Steven C 150 Brush Creek Drive Rochester NY 14612 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Sloan, Dale 31 Modelane Rochester NY 14618 <input checked="" 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	P Cayner, Michael S 8 Auburndale Pittsford NY 14534 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Miller, Douglas M 19 Kathrene Ct Webster NY 14580 <input checked="" 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)(l), 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 life empowered.

SIGNATURE: *Douglas M. Miller* **Douglas M. Miller** 3/28/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CONTROLLER

CR2E034 (10/00)

Attachment
43845
J47331

ACCEPTANCE OF APPOINTMENT BY REGISTERED AGENT

The undersigned hereby acknowledges the appointment as registered agent for
Boca Brush & Chemical, Inc. in Florida.

CT Corporation System

K.A.S.
Kevin A. Seburnia, Assistant Secretary