

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P09745**1. Entity Name
FORTUNE PLASTICS, INC.**FILED**
Mar 21, 2001 8:00 am
Secretary of State

03-21-2001 90021 018 ***150.00

Principal Place of Business

Mailing Address

**WILLIAMS LANE
PO BOX 637
OLD SAYBROOK CT 06475****WILLIAMS LANE
PO BOX 637
OLD SAYBROOK CT 06475**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **06-0699218**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**O'NEILL, BERNARD C. JR.
200 E. ROBINSON ST.
#865
ORLANDO FL 32801**

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 State10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
	MATHIEU, JOHN A.	32 OAK RIDGE RD	WESTBROOKE CT	☐
	ANDERSON, KEITH	12 FURDHAM TRAIL	OLD SAYBROOK CT	☐
	LUND, HENRY	325 CHESTNUT ST #909	PHILADELPHIA PA	☐
	DUHIG, JOHN P.	7 OVERLOOK DR	OLD SAYBROOK CT	☐
	HUGAN, PAUL	325 CHESTNUT STREET SUITE 919	PHILADELPHIA PA	☐
	GILLESPIE, EDWARD F.	60 HURLBURT ST	GLASTONBURY CT	☐

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John Mathieu**3/16/01**

Date

860-388-3426 x116

Daytime Phone #

CR2E034 (10/00)