

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2003 8:00 am
Secretary of State

02-21-2003 90166 014 ***150.00

DOCUMENT # P10813

1. Entity Name
CONTECH CONSTRUCTION PRODUCTS INC.



Principal Place of Business
1001 GROVE ST.
MIDDLETOWN OH 45044

Mailing Address
1001 GROVE ST.
MIDDLETOWN OH 45044

90032037



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

City & State

4. FEI Number 31-1177165

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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CDP	<input type="checkbox"/> Delete
NAME	HARLOW, PATRICK M	
STREET ADDRESS	1001 GROVE ST.	
CITY-ST-ZIP	MIDDLETOWN OH 45044	
TITLE	VS	<input type="checkbox"/> Delete
NAME	FORTENER, C L	
STREET ADDRESS	1001 GROVE ST	
CITY-ST-ZIP	MIDDLETOWN OH 45044	
TITLE	VT	<input type="checkbox"/> Delete
NAME	CASERTA, RICH L	
STREET ADDRESS	1001 GROVE ST	
CITY-ST-ZIP	MIDDLETOWN OH 45044	
TITLE	V	<input type="checkbox"/> Delete
NAME	MCCORMICK, M H	
STREET ADDRESS	1001 GROVE ST.	
CITY-ST-ZIP	MIDDLETOWN OH 45044	
TITLE	V	<input type="checkbox"/> Delete
NAME	MILLER, FRANK	
STREET ADDRESS	1001 GROVE STREET	
CITY-ST-ZIP	MIDDLETOWN OH	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	D Gilbert Butler	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	767 Fifth Ave.	
STREET ADDRESS	New York NY 10153	
CITY-ST-ZIP		
TITLE	Donald E Cihak	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	767 Fifth Ave.	
STREET ADDRESS	New York NY 10153	
CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mark L Kornhauser	
STREET ADDRESS	1001 Grove St	
CITY-ST-ZIP	Middletown OH 45044	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Theodore E DeVilbiss	
STREET ADDRESS	1001 Grove St	
CITY-ST-ZIP	Middletown OH 45044	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Andrew J. Sabados	
STREET ADDRESS	1001 Grove St.	
CITY-ST-ZIP	Middletown OH 45044	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Rick G. Stepien	
STREET ADDRESS	1001 Grove St	
CITY-ST-ZIP	Middletown OH 45044	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

Richard Harlow
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)