

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P13835

1. Entity Name

RICOH CORPORATION

Principal Place of Business

5 DEDRICK PLACE
W. CALDWELL NJ 07006

Mailing Address

5 DEDRICK PLACE
W. CALDWELL NJ 07006

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 22-2783521

Applied For

Not Applicable

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.

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 State

10. 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	S	☐ Delete
NAME	POLUCKI, ROBERT D.	
STREET ADDRESS	5 DEDRICK PLACE	
CITY-ST-ZIP	W. CALDWELL NJ 07006	
TITLE	C	☒ Delete
NAME	YUASA, HISAO	
STREET ADDRESS	5 DEDRICK PLACE	
CITY-ST-ZIP	W. CALDWELL NJ 07006	
TITLE	VC	☐ Delete
NAME	YOSHIDA, KATSUMI	
STREET ADDRESS	5 DEDRICK PLACE	
CITY-ST-ZIP	W. CALDWELL NJ 07006	
TITLE	TGVP	☐ Delete
NAME	MINAKAWS, KUNI	
STREET ADDRESS	5 DEDRICK PLACE	
CITY-ST-ZIP	W. CALDWELL NJ 07006	
TITLE	PSD	☒ Delete
NAME	KAZUYUKI, BABA	
STREET ADDRESS	3001 ORCHAD PARKWAY	
CITY-ST-ZIP	SAN JOSE CA 95134	
TITLE	PSC	☐ Delete
NAME	IVY, JAMES W	
STREET ADDRESS	333 LUDLOW STREET	
CITY-ST-ZIP	STAMFORD CT 06904	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Chairman of Board of Direc.	☒ Change ☐ Addition
NAME	President and CEO	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Treasurer/Vice President/ Director	☒ Change ☐ Addition
NAME	Minakawa, Kuni	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Director	☒ Change ☒ Addition
NAME		
STREET ADDRESS	5 Dedrick Place	
CITY-ST-ZIP	W. Caldwell, NJ 07006	

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:

Robert D. Polucki
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Robert D. Polucki, Secretary

1/29/01

Date

(973) 882-2128

Daytime Phone #

CR2E034 (10/00)

FILED
Feb 07, 2001 8:00 am
Secretary of State

02-07-2001 90202 048 ***150.00

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DO NOT WRITE IN THIS SPACE