

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000002661

1. Entity Name

MELITTA NORTH AMERICA, INC.

FILED

Apr 11, 2000 8:00 am
Secretary of State

04-11-2000 90209 045 ***158.75

Principal Place of Business

Mailing Address

13925 58TH STREET N
CLEARWATER FL 33760
US

13925 58TH STREET N
CLEARWATER FL 33760-3721
US

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

22-1732130

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

O'KEEFE, MICHAEL F
13925 58TH ST N
CLEARWATER FL 33760

Name

Fred Lucke

Street Address (P.O. Box Number is Not Acceptable)

13925 58th Street N.

City

Clearwater

FL

Zip Code

33760

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, 2000 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
NAME
STREET ADDRESS
CITY-ST-ZIP

DP
RADTKE, H. HELMUT
13925 58TH ST N
CLEARWATER FL

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PD
Martin T. Keller
13925 58th Street N.
Clearwater, FL 33760

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

T
O'KEEFE, MICHAEL F
13925 58TH ST N
CLEARWATER FL

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VS
Fred Lucke
13925 58th Street N.
Clearwater, FL 33760

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

S
MODZELEWSKI, MICHAEL
13925 58TH ST N
CLEARWATER FL

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

AT
WOHLWEND, BETH
13925 58TH STREET N
CLEARWATER FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

T

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
HUMPHRIES, ROBERT
501 E KENNEDY BLVD #1700
TAMPA FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

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

Date

Daytime Phone #

CR2E034 (9/99)