

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 834680

1. Entity Name

MERCHANTS HOME DELIVERY SERVICE, INC.

FILED
May 18, 2000 8:00 am
Secretary of State

05-18-2000 90290 027 ***150.00

Principal Place of Business

Mailing Address

~~2400 LATIGO AVENUE~~ 1911 Williams Dr #101
P.O. BOX 5067
OXNARD CA 93030

~~2400 LATIGO AVENUE~~ 1911 Williams Dr #101
P.O. BOX 5067
OXNARD CA 93030-8912

2. Principal Place of Business

1911 Williams Drive

3. Mailing Address

1911 Williams Dr

Suite, Apt. #, etc.

101

Suite, Apt. #, etc.

101

City & State

Oxnard, California

City & State

Oxnard, California

Zip

93030

Country

Zip

93030

Country

4. FEI Number

95-2653439

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

THE PRENTICE-HALL CORP. SYSTEM INC.
110 MAGNOLIA ST.
TALLAHASSEE FL 32301

Name

U.S. Corporation Company

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

1201 Hays Street, Ste 105

City

Tallahassee

FL

Zip Code

32301

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	P	<input type="checkbox"/> Delete
NAME	ALLYN, JAMES J.	
STREET ADDRESS	2400 LATIGO AVE.	
CITY-ST-ZIP	OXNARD, CA 0	
TITLE	GCAS	<input type="checkbox"/> Delete
NAME	BORATYN, MARTIN T	
STREET ADDRESS	2400 LATIGO AVENUE	
CITY-ST-ZIP	OXNARD CA 93030	
TITLE	D	<input type="checkbox"/> Delete
NAME	MUSSA, MAURICE A	
STREET ADDRESS	2400 LATIGO AVENUE	
CITY-ST-ZIP	OXNARD CA 93030	
TITLE	VPO	<input type="checkbox"/> Delete
NAME	ROBERT CRUMBLY	
STREET ADDRESS	2400 LATIGO AVE	
CITY-ST-ZIP	OXNARD CA	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	KENNETH BARRY	
STREET ADDRESS	2400 LATIGO AVE	
CITY-ST-ZIP	OXNARD CA	
TITLE	VPF	<input type="checkbox"/> Delete
NAME	BRIAN LAYFIELD	
STREET ADDRESS	2400 LATIGO AVE	
CITY-ST-ZIP	OXNARD CA	

TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	1911 Williams Drive Ste. 101	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	1911 Williams Drive #101	
CITY-ST-ZIP		
TITLE	Vice President Service Delivery Team	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	1911 Williams Dr #101	
CITY-ST-ZIP		
TITLE	Vice President, Resource Development	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	1911 Williams Drive #101	
CITY-ST-ZIP		
TITLE	Vice President, Groups A, B, C	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Kenneth J. Mangan	
STREET ADDRESS	1911 Williams Drive #101	
CITY-ST-ZIP	Oxnard, CA 93030	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	1911 Williams Drive #101	
CITY-ST-ZIP		

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 #

4/26/00

(805) 485-7979

CR2E034 (9/99)

834680
848595

MERCHANTS HOME DELIVERY SERVICE, INC.

DIRECTORS

James J. Allyn	1911 Williams Drive, Suite 101 Oxnard, CA 93030
Robert J. Crumbley	1911 Williams Drive, Suite 101 Oxnard, CA 93030
Kenneth J. Mangen	1911 Williams Drive, Suite 101 Oxnard, CA 93030
Brian T. Layfield	1911 Williams Drive, Suite 101 Oxnard, CA 93030
Maurice A. Mussa	1911 Williams Drive, Suite 101 Oxnard, CA 93030

OFFICERS

James J. Allyn	President Chief Executive Officer
Brian Layfield	VP-Finance, CFO, Sec and Treasurer
Robert Crumbley	Vice President, Resource Development
Kenneth J. Mangen	Vice President, Groups A,B,C
Maurice A. Mussa	Vice President, Service Delivery Team
Martin T. Boratyn	General Counsel and Assistant Secretary