## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Mar 12, 2001 8:00 am DOCUMENT # P92000014247 **Secretary of State** FARO TECHNOLOGIES, INC. 03-12-2001 90069 001 \*\*\*317.50 Principal Place of Business Mailing Address 125 TECHNOLOGY PARK 125 TECHNOLOGY PARK LAKE MARY FL 32746 LAKE MARY FL 32746 23304 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-3157093 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TRABER, MARTIN A. Street Address (P.O. Box Number is Not Acceptable) **FOLEY & LARDNER** 100 N. TAMPA STREET, #2700 **TAMPA FL 33602** City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Change TITLE ☐ Delete TITLE ole Ltd. Ste 2000 CARIO, CANADA MSH 2A4 RAAB, SIMON NAME NAME 125 TECHNOLOGY PARK STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKE MARY FL forento ONTARIO, ☐ Delete TITLE TITLE FRASER, GREGORY A Ltd. NAME NAME STREET ADDRESS STREET ADDRESS 125 TECHNOLOGY PARK CITY-ST-ZIP CITY-ST-ZIP LAKE MARY FL 088 ☐ Addition TITLE ☐ Delete TITLE D'AMOURS, HUBERT NAME NAME STREET ADDRESS STREET ADDRESS 393 RUE SAINT-JACQUES O #258 CITY-ST-ZIP CITY-ST-ZIP MONTREAL QU TITLE Delete TITLE ☐ Change Addition NAME COLLEY, PHILIP R NAME STREET ADDRESS STREET ADDRESS 4591 HWY 7 E CITY-ST-ZIP CITY-ST-ZIP UNIONVILLE, ONTARIO

plied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 13. I hereby certify that the information indicated on this report or su of the corporation or the re-changed, or on an attachme A 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 see empowered to execute this report as required by Chapter 607 Florida Statutes; and that my name appears in Block 11 or Block 12 if

TITLE

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

JULIEN, ANDRE

1925 32ND AVE

LACHINE QU

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

☐ Delete

Delete

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☐ Addition

☐ Addition