

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 18, 2001 8:00 am
Secretary of State
 05-18-2001 91554 042 ***150.00

DOCUMENT # 142 642

1. Entity Name

Fort Dallas Docks, Inc.

Principal Place of Business

c/o Tax Department
 250 East Fifth St., 27th Floor
 Cincinnati OH 45202

Mailing Address

c/o Tax Department
 250 East Fifth St., 27th Floor
 Cincinnati OH 45202

00055402

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
 59-0522457

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT Corporation System
 1200 South 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	D/P	<input type="checkbox"/> Delete
NAME	Jeff E. Filliater	
STREET ADDRESS	250 East Fifth St.	
CITY-ST-ZIP	Cincinnati OH 45202	
TITLE	D/V	<input type="checkbox"/> Delete
NAME	Gustavo Fonseca Barquero	
STREET ADDRESS	250 East Fifth St.	
CITY-ST-ZIP	Cincinnati OH 45202	
TITLE	V	<input type="checkbox"/> Delete
NAME	Joseph W. Bradley	
STREET ADDRESS	250 East Fifth St.	
CITY-ST-ZIP	Cincinnati OH 45202	
TITLE	S/T	<input type="checkbox"/> Delete
NAME	Michael Carter	
STREET ADDRESS	250 East Fifth St.	
CITY-ST-ZIP	Cincinnati OH 45202	
TITLE	Assistant S	<input type="checkbox"/> Delete
NAME	Barbara M. Howland	
STREET ADDRESS	250 East Fifth St.	
CITY-ST-ZIP	Cincinnati OH 45202	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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CITY-ST-ZIP		
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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:

Joseph W. Bradley
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph W. Bradley

4/26/01

(513) 784-8727

CR2E034 (11/00)