

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2001 8:00 am
Secretary of State
03-06-2001 90285 011 ***150.00

DOCUMENT # 160648

1. Entity Name
MCARTHUR DAIRY, INC.

Principal Place of Business Mailing Address
500 SAWGRASS CORPORATE PARKWAY 500 SAWGRASS CORPORATE PARKWAY
SUNRISE FL 33325 SUNRISE FL 33325

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 **59-0608937** 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
C/O 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

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 NAME STREET ADDRESS CITY-ST-ZIP	V ABELL, BRADLEY C 500 SAWGRASS CORP. PKWY SUNRISE FL 33325	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAILEY, RICHARD E 3600 N RIVER ROAD FRANKLIN PARK IL 60131	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MCMANAMAN, WILLIAM R. 3600 N. RIVER ROAD FRANKLIN PARK IL 60131	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HILLS, RICHARD L. 500 SAWGRASS CORP. PKWY. SUNRISE FL 33325	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEAN, HOWARD 3600 N. RIVER ROAD FRANKLIN PARK IL 60131	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KLEBER, DALE E 3600 N. RIVER RD. FRANKLIN PARK IL 60131	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	C (Controller) Hoover, James 500 Sawgrass Corp. Pkwy. Sunrise, FL 33325	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Klein, Barbara A. 3600 N. River Road Franklin Park, IL 60131	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	A T (Assistant Treasurer) McElroy, Michael 3600 N. River Road Franklin Park, IL 60131	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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: James Hoover JAMES HOOVER 2/26/01 954-846-1234
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

Page 2

McArthur Additional Directors

Re: 2001 Uniform Business Report (UBR)

629240
Attachment

Document # 160648
FEI Number: 59-0608937

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

AT (Assistant Treasurer)
Mann, John A.
3600 N. River Road
Franklin Park, IL 60131

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
Ravencroft, Thomas A.
3600 N. River Road
Franklin Park, IL 60131

DELETE