

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Aug 27, 2001 08:00 AM  
Secretary of State**

**DOCUMENT # 166297**

1. Entity Name  
WM. THIES & SONS, INC.

Principal Place of Business 1335 NE 26TH ST  FORT LAUDERDALE FL 33305	Mailing Address 791 PARK OF COMMERCE # 300 BOCA RATON FL 334873620
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2. Principal Place of Business 791 PARK OF COMMERCE BLVD.	3. Mailing Address 791 PARK OF COMMERCE BLVD.
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Suite, Apt. #, etc. #300	Suite, Apt. #, etc. # 300
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City & State BOCA RATON FL	City & State BOCA RATON FL
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Zip 334873620	Country US	Zip 334873620	Country US
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4. FEI Number <b>59-0657931</b>	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**

THIES DENNIS W  
791 PARK OF COMMERCE  
SUITE 300  
BOCA RATON FL 334873620 US

**7. Name and Address of New Registered Agent**

Name  
THIES DENNIS W  
Street Address (P.O. Box Number is Not Acceptable)  
791 PARK OF COMMERCE BLVD.  
SUITE 300  
City  
BOCA RATON FL Zip Code  
334873620

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 \_\_\_\_\_ DATE **08/27/2001**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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			
TITLE	S	<input checked="" type="checkbox"/> Delete	
NAME	BOWNE ROBERT A		
STREET ADDRESS	791 PARK OF COMMERCE # 300		
CITY-ST-ZIP	BOCA RATON FL 334873620		
TITLE	S	<input type="checkbox"/> Delete	
NAME	BOWNE, ROBERTA A.		
STREET ADDRESS	791 PARK OF COMMERCE # 300		
CITY-ST-ZIP	BOCA RATON FL 334873620		
TITLE	VD	<input type="checkbox"/> Delete	
NAME	THIES JR., WILLIAM F.		
STREET ADDRESS	791 PARK OF COMMERCE # 300		
CITY-ST-ZIP	BOCA RATON FL 334873620		
TITLE	T	<input type="checkbox"/> Delete	
NAME	MILLS, BRUCE E.		
STREET ADDRESS	791 PARK OF COMMERCE # 300		
CITY-ST-ZIP	BOCA RATON FL 334873620		
TITLE	PD	<input type="checkbox"/> Delete	
NAME	THIES, DENNIS W		
STREET ADDRESS	791 PARK OF COMMERCE # 300		
CITY-ST-ZIP	BOCA RATON FL 334873620		
TITLE	CD	<input type="checkbox"/> Delete	
NAME	THIES, WILLIAM F.		
STREET ADDRESS	791 PARK OF COMMERCE # 300		
CITY-ST-ZIP	BOCA RATON FL 334873620		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE	D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	THIES, DENNIS P.		
STREET ADDRESS	791 PARK OF COMMERCE BLVD. # 300		
CITY-ST-ZIP	BOCA RATON FL 334873620		
TITLE	S	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	BOWNE, ROBERTA A.		
STREET ADDRESS	791 PARK OF COMMERCE BLVD. # 300		
CITY-ST-ZIP	BOCA RATON FL 334873620		
TITLE	VTD	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MILLS, BRUCE E.		
STREET ADDRESS	791 PARK OF COMMERCE BLVD. # 300		
CITY-ST-ZIP	BOCA RATON FL 334873620		
TITLE	P	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	THIES, WILLIAM F., JR.		
STREET ADDRESS	791 PARK OF COMMERCE BLVD. # 300		
CITY-ST-ZIP	BOCA RATON FL 334873620		
TITLE	CD	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	THIES, DENNIS W.		
STREET ADDRESS	791 PARK OF COMMERCE BLVD. # 300		
CITY-ST-ZIP	BOCA RATON FL 334873620		

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:** DENNIS P. THIES **D** **08/27/2001**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)