

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 11, 2002 8:00 am
Secretary of State

09-11-2002 90119 002 ***550.00

DOCUMENT # 184396

1. Entity Name
UNITED WATER SOUTH GATE INC.

Principal Place of Business
200 OLD HOOK ROAD
HARRINGTON PARK NJ 07640
US

Mailing Address
C/O UNITED WATER
200 OLD HOOK ROAD
HARRINGTON PARK NJ 07640



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-0803703**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

Name

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

City

FL

Zip Code

8. This above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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	PD	<input type="checkbox"/> Delete
NAME	REICHLIN, DOUGLAS	
STREET ADDRESS	200 OLD HOOK ROAD	
CITY-ST-ZIP	HARRINGTON PARK NJ 07640	
TITLE	D	<input type="checkbox"/> Delete
NAME	IACULLO, ROBERT	
STREET ADDRESS	200 OLD HOOK RD	
CITY-ST-ZIP	HARRINGTON PARK NJ	
TITLE	D	<input type="checkbox"/> Delete
NAME	DE VOGUE, MEL	
STREET ADDRESS	200 OLD HOOK RD	
CITY-ST-ZIP	HARRINGTON PARK NJ 07640	
TITLE	VP	<input type="checkbox"/> Delete
NAME	MOSELEY, GARY	
STREET ADDRESS	200 OLD HOOK ROAD	
CITY-ST-ZIP	HARRINGTON PARK NJ 07640	
TITLE	S	<input type="checkbox"/> Delete
NAME	HJELM, CARLA E	
STREET ADDRESS	200 OLD HOOK RD	
CITY-ST-ZIP	HARRINGTON PARK NJ 07640	
TITLE	AS	<input type="checkbox"/> Delete
NAME	LAURINO, MARIA D	
STREET ADDRESS	200 OLD HOOK ROAD	
CITY-ST-ZIP	HARRINGTON PARK NJ 07640	

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

CR2E034 (4/02)

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

9/9/02

Date

Daytime Phone #