

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 800178

1. Entity Name

FLORIDIN COMPANY

Principal Place of Business

1101 N. MADISON ST.
C/O L. BURKHART
QUINCY FL 32351
US

Mailing Address

C O L BURKHART
PO BOX 187
BERKELEY SPRINGS WV 25411-0187
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-0249005

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

CT CORPORATION SYSTEM
1200 S. 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, 2000 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	DPC	<input checked="" type="checkbox"/> Delete
NAME	WHITE-THOMSON, IAN	
STREET ADDRESS	26877 TOURNEY ROAD	
CITY-ST-ZIP	VALENCIA CA 91355	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	HUGHES, NIGEL	
STREET ADDRESS	26877 TOURNEY ROAD	
CITY-ST-ZIP	VALENCIA CA 91355	
TITLE	VP	<input type="checkbox"/> Delete
NAME	PEPPER, GERALD M	
STREET ADDRESS	26877 TOURNEY RD	
CITY-ST-ZIP	VALENCIA CA	
TITLE	SD	<input type="checkbox"/> Delete
NAME	STOCKMAN, MICHAEL I	
STREET ADDRESS	26877 TOURNEY ROAD	
CITY-ST-ZIP	VALENCIA CA	
TITLE	T	<input type="checkbox"/> Delete
NAME	LARSEN, DANIEL	
STREET ADDRESS	26877 TOURNEY RD	
CITY-ST-ZIP	VALENCIA CA	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	DPC	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Preston S. Chiaro	
STREET ADDRESS	26877 Tourney Road	
CITY-ST-ZIP	Valencia, CA 91355	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Joseph A. Carrabba	
STREET ADDRESS	26877 Tourney Road	
CITY-ST-ZIP	Valencia, CA 91355	
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		

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:

Charles A. Stiller

Chief Legal Officer & General Counsel / Sec. 3/27/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(661) 287-5400

FILED
Apr 11, 2000 8:00 am
Secretary of State

04-11-2000 90013 034 ***150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (9/99)