

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2002 8:00 am
Secretary of State

05-16-2002 90066 033 ***150.00

DOCUMENT # 808326

1. Entity Name
MILTON ROY COMPANY

Principal Place of Business

201 IVYLAND ROAD
P O BOX 7003
IVYLAND PA 18974-0577
US

Mailing Address

201 IVYLAND ROAD
P O BOX 7003
IVYLAND PA 18974-0577
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

23-1281355

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

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, 2002 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

TD ☒ Delete
NAME **ROGAN, THOMAS**
STREET ADDRESS **1 HAMILTON RD**
CITY-ST-ZIP **WINDSOR LOCKS CT 06096**

☐ Delete
NAME **PHARAMOND, JEAN C**
STREET ADDRESS **201 IVY LAND RD**
CITY-ST-ZIP **IVYLAND PA 18974**

☐ Delete
NAME **MONTES, MICHAEL A**
STREET ADDRESS **1 HAMLTON RD**
CITY-ST-ZIP **WINDSOR FL**

☐ Delete
NAME **GEST, JOSEPH S**
STREET ADDRESS **1 HAMILTON RD.**
CITY-ST-ZIP **WINDSOR LOCKS CT 06096**

☒ Delete
NAME **MALINOWSKY, CHET JR**
STREET ADDRESS **1 FINANCIAL PLAZA**
CITY-ST-ZIP **HARTFORD CT 06103**

☐ Delete
NAME **GAILING, EDWARD R**
STREET ADDRESS **1 FINANCIAL PLAZA**
CITY-ST-ZIP **HARTFORD CT 06103**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

T D ☐ Change ☒ Addition
NAME **Todd Kallman**
STREET ADDRESS **1 Hamilton Rd.**
CITY-ST-ZIP **Windsor Locks, CT 06096**

☐ Change ☒ Addition
NAME **Edwin W. Laprade**
STREET ADDRESS **1 Hamilton Rd**
CITY-ST-ZIP **Windsor Locks, CT 06096**

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 22, 2002 25-441-0800

Date

Daytime Phone #

CR2E034 (9/01)