

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2002 8:00 am
Secretary of State
 05-15-2002 90027 033 ***150.00

DOCUMENT # 810470

1. Entity Name
REICHHOLD, INC.

Principal Place of Business

2400 ELLIS ROAD
P.O. BOX 13582
DURHAM NC 27703
US

Mailing Address

REICHHOLD CHEMICALS, INC
ATT: TOMMY RILEY, P.O BOX 13582
RTP NC 27709
US

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

13-1764826

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
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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD KAWASHIMA, YOSHI 2400 ELLIS RD DURHAM NC 27703	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KRALL, GARY S 2400 ELLIS ROAD DURHAM NC 27703	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ZEH, HERBERT J JR 2400 ELLIS RD DURHAM NC	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HOLCOMBE, WILLIAM R 2400 ELLIS RD DURHAM NC 27703	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KUMAGAI, TAKESHI 2400 ELLIS RD DURHAM NC 27703	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KOBATA, FUMIHIRO 2400 ELLIS ROAD DURHAM NC 27703	☒ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, V ABE, SHIZUHIKO 2400 ELLIS RD DURHAM, NC 27703	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, D	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V VAN LEEUWEN, M I T Z I 2400 ELLIS RD DURHAM, NC 27703	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ITO, TAIZO 2400 ELLIS RD DURHAM, NC 27703	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YASUJI, TSUKENKAWA 2400 ELLIS RD DURHAM, NC 27703	☐ 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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-02 (919) 990-7948

Date

Daytime Phone #

CR2E034 (9/01)