

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91806 005 ***150.00

0648030 AT

DOCUMENT # 810763

1. Entity Name
EAGLE-PICHER INDUSTRIES, INC.



Principal Place of Business
**250 E. FIFTH STREET
SUITE 500
CINCINNATI OH 45202
US**

Mailing Address
**P.O. BOX 779
CINCINNATI OH 45201
US**



2. Principal Place of Business
11201 N. Tatum Blvd.

3. Mailing Address
11201 N. Tatum Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 110

SUITE 110

City & State

City & State

PHOENIX, AZ

PHOENIX, AZ

Zip

Country

Zip

Country

85028

UNITED STATES

85028

UNITED STATES

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **31-0268670**

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. 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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **VPCF**
STREET ADDRESS **PILHOLSKI, THOMAS R**
CITY-ST-ZIP **135 GARFIELD PLACE #437
CINCINNATI OH 45202**

☒ Change ☐ Addition
TITLE
NAME
STREET ADDRESS **11201 N. Tatum Blvd, Suite 110**
CITY-ST-ZIP **PHOENIX, AZ 85028**

TITLE ☐ Delete
NAME **CD**
STREET ADDRESS **WYLER, JOEL P.**
CITY-ST-ZIP **8 KONIJNENLAAN
2243 ER WASSENAAR NE**

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **SCHERENBERG, TOM B**
STREET ADDRESS **5133 AUTUMNWOOD DRIVE**
CITY-ST-ZIP **CINCINNATI OH 45242**

☒ Change ☐ Addition
TITLE
NAME
STREET ADDRESS **250 E. Fifth St., Suite 500**
CITY-ST-ZIP **CINCINNATI, OH 45202**

TITLE ☐ Delete
NAME **VPS**
STREET ADDRESS **KRALL, DAVID G**
CITY-ST-ZIP **7910 DEER CROSSING
CINCINNATI OH 45226**

☒ Change ☐ Addition
TITLE
NAME
STREET ADDRESS **250 E. Fifth St., Suite 500**
CITY-ST-ZIP **CINCINNATI, OH 45202**

TITLE ☒ Delete
NAME **VP**
STREET ADDRESS **EVANS, DAVID N**
CITY-ST-ZIP **9802 TOLLGATE LANE
CINCINNATI OH 45226**

☐ Change ☒ Addition
TITLE
NAME **JOHN F. SULLIVAN**
STREET ADDRESS **11201 N. Tatum Blvd., Suite 110**
CITY-ST-ZIP **PHOENIX, AZ 85028**

TITLE ☒ Delete
NAME **VP**
STREET ADDRESS **SISSON, JEFFREY D**
CITY-ST-ZIP **135 GARFIELD PLACE #534
CINCINNATI OH 45202**

☐ Change ☒ Addition
TITLE
NAME **JERRY MILLS**
STREET ADDRESS **11201 N. Tatum Blvd., Suite 110**
CITY-ST-ZIP **PHOENIX, AZ 85028**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

DAVID G. KRALL, VP & Secy

4/28/03

513-625-2417

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)