

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 811143

1. Entity Name

U.S. FILTER DISTRIBUTION GROUP, INC.

FILED

Apr 03, 2000 8:00 am  
Secretary of State

04-03-2000 90121 015 \*\*\*150.00

Principal Place of Business

Mailing Address

200 HWY 6 WEST AMERICAN PLAZA  
STE 620  
WACO TX 76712  
US

40004 COOK STREET  
PALM DESERT CA 92211-3299  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

58-0959907

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 VP  
NAME SLAUGHTER, MICHELLE  
STREET ADDRESS 200 HWY 6 WEST  
CITY-ST-ZIP WACO TX 76712 ☐ Delete

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

TITLE DP  
NAME HORNISH, HARRY K  
STREET ADDRESS 200 HWY 6 W STE 620  
CITY-ST-ZIP WACO TX ☐ Delete

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

TITLE DVP  
NAME SPENCE, KEVIN L  
STREET ADDRESS 40004 COOK STREET  
CITY-ST-ZIP PALM DESERT CA ☐ Delete

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

TITLE VPSD  
NAME STANCZAK, STEPHEN P  
STREET ADDRESS 40-004 COOK ST  
CITY-ST-ZIP PALM DESERT CA 92211 ☐ Delete

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

TITLE VPT  
NAME DIERKER, JAMES W  
STREET ADDRESS 40004 COOK ST  
CITY-ST-ZIP PALM DESERT CA ☐ Delete

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

TITLE AS  
NAME GOSSIN, AMY G  
STREET ADDRESS 40-004 COOK ST  
CITY-ST-ZIP PALM DESSERT CA 92211 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ 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

Kevin L. Spence 3/27/2000

Date

Daytime Phone #

262-521-8504

CR2E034 (9/99)