

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90095 032 ***158.75

DOCUMENT # 812285

1. Entity Name

EDWIN B. STIMPSON COMPANY, INC.

Principal Place of Business

Mailing Address

SYLVAN AVENUE
PORT L. I. NY 11705

900 SYLVAN AVENUE
BAYPORT L. I. NY 11705-1012

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

11-1373230

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

UNITED STATES CORPORATION COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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, 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 **DCB** ☐ Delete
 NAME **RAU, HOWARD C.**
 STREET ADDRESS **1515 SW 13TH COURT**
 CITY-ST-ZIP **POMPANO BEACH FL**

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

TITLE **VD** ☐ Delete
 NAME **THOMAS, SCOTT H**
 STREET ADDRESS **1515 SW 13TH CT**
 CITY-ST-ZIP **POMPANO BCH FL**

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

TITLE **PD** ☐ Delete
 NAME **RAU, RALPH E., JR.**
 STREET ADDRESS **1515 SW 13TH CT**
 CITY-ST-ZIP **POMPANO BEACH FL**

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

TITLE **VD** ☐ Delete
 NAME **RAUSS, WILLIAM G**
 STREET ADDRESS **900 SYLVAN AVE.**
 CITY-ST-ZIP **BAYPORT NY**

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

TITLE **D** ☐ Delete
 NAME **DEWALTERS, EDWARD J**
 STREET ADDRESS **900 SYLVAN AVE.**
 CITY-ST-ZIP **BAYPORT NY**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(631) 472-2000

Daytime Phone #

EDWIN B. STIMPSON COMPANY, INC.

812285

11. OFFICERS AND DIRECTORS (Continued)

- 7.1 Title: V/S/CFO/D
- 7.2 Name: FORTMULLER, GEORGE A.
- 7.3 Address: 900 SYLVAN AVENUE
- 7.4 City-St-Zip: BAYPORT, NY 11705

- 8.1 Title: V/D
- 8.2 Name: JOHN H. RAU
- 8.3 Address: 1515 S.W. 13TH COURT
- 8.4 City-St-Zip: POMPANO BEACH, FLA 33069

- 9.1 Title: EV/D
- 9.2 Name: JAMES E. CUENIN
- 9.3 Address: 900 SYLVAN AVENUE
- 9.4 City-St-Zip: BAYPORT, NY 11705