

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90196 025 ***158.75

DOCUMENT # 812285

1. Entity Name
EDWIN B. STIMPSON COMPANY, INC.

Principal Place of Business

**900 SYLVAN AVENUE
 BAYPORT L. I. NY 11705**

Mailing Address

**900 SYLVAN AVENUE
 BAYPORT L. I. NY 11705**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DO NOT WRITE IN THIS SPACE

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

7. Name and Address of New Registered Agent

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

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)

☒

10. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution: ☐

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 **POMPAÑO 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 **POMPAÑO 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 **POMPAÑO 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:

George A. Fortmuller
 George A. Fortmuller, Secretary, Vice President & Chief Financial Officer

1/22/02 (631) 472-2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

427826

**EDWIN B. STIMPSON COMPANY, INC.
900 SYLVAN AVENUE
BAYPORT, NEW YORK 11705**

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, State, Zip:	BAYPORT, NY 11705
8.1	Title:	V/D
8.2	Name:	JOHN H. RAU
8.3	Address:	1515 S.W. 18 TH COURT
8.4	City, State, Zip:	POMPANO BEACH, FL 33069
9.1	Title:	EV/D
9.2	Name:	JAMES E. CUENIN
9.3	Address:	900 SYLVAN AVENUE
9.4	City, State, Zip:	BAYPORT, NY 11705
10.1	Title:	TREASURER
10.2	Name:	PETER ALBANO
10.3	Address:	900 SYLVAN AVENUE
10.4	City, State, Zip:	BAYPORT, NY 11705

