

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 819084

1. Entity Name

THE WEITZ COMPANY I, INC.

FILED
Aug 01, 2002 8:00 am
Secretary of State

08-01-2002 90171 005 ***550.00

UN42078 AB

Principal Place of Business

400 LOCUST STREET
SUITE 300
DES MOINES IA 50309

Mailing Address

400 LOCUST STREET
SUITE 300
DES MOINES IA 50309



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

400 LOCUST STREET

Suite, Apt. #, etc.

SUITE 300

City & State

DES MOINES IA

Zip

50309

Country

USA

3. Mailing Address

400 LOCUST STREET

Suite, Apt. #, etc.

SUITE 300

City & State

DES MOINES IA

Zip

50309

Country

USA

4. FEI Number 42-0591030

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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. 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

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)

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FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PCOE
DESTIGTER, GLENN H.
3209 NE TRILEIN
ANKENY IA

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P
KEOPNICK, JIMMY R.
2640 HOPE LANE
LAKE PARK FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P
MOHR, LARRY D.
1830 SOUTH ROGERS
MESA AZ

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VPCF
DAMOS, CRAIG P
400 LOCUST STREET, STE. 300
DES MOINES IA 50309-2331

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

GCS
STRUTT, DAVID S
400 LOCUST ST., SUITE 300
DES MOINES IA 50309-2331

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TAS
BLUM, DONALD R
400 LOCUST STREET, SUITE 300
DES MOINES IA 50309-2331

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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☐ 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

DAVID S. STRUTT 7-18-02

(515) 698-4260

CR2E034 (4/02)