## 2000 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT #820180**

CT CORPORATION SYSTEM

1200 S. PINE ISLAND ROAD **PLANTATION FL 33324** 

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

HAZLETON, RA

ANDERSON, G E

220 SALZBURG ROAD

220 SALZBURG ROAD

2200 SALZBURG ROAD

MIDLAND MI

MIDLAND MI

JENKINS, J. R.

Midland Mi

KELLY, B S

MIDLAND MI

MIDLAND MI

LACEFIELD, C. W.

220 SALZBURG ROAD

CHURCHFIELD, JOHN W.

2200 SALZBURG ROAD

2200 SALZBURG ROAD

(See criteria on back)

SIGNATURE

11.

NAME

NAME

TITLE

NAME

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NAME

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NAME

STREET ADDRESS

STREET ADDRESS

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CITY-ST-ZIP

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DOW CORNING CORPORATION			
Principal Place of Business		Mailing Address	
TAX DEPARTMENT C01112 MIDLAND MI 48686-7994 US		TAX DEPARTMENT CO1112 MIDLAND MI 48686-0001 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

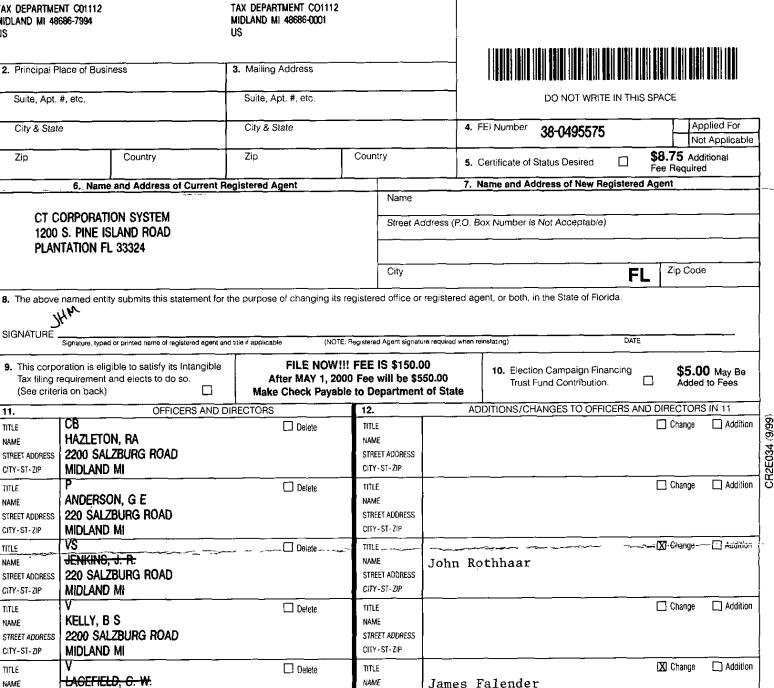
6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

OFFICERS AND DIRECTORS

## FILED May 19, 2000 8:00 am Secretary of State

05-19-2000 90021 046 \*\*\*150.00



CITY-ST-ZIP CITY-ST-ZIP MIDLAND MI 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 li

Name

City

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

TIT1 F

NAME

TITLE

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NAME

TITLE

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NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

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SIGNATURE:

Daytime Phone #

☐ Change

☐ Addition