

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 824426

1. Entity Name

GENERAL NUTRITION CORPORATION

FILED
May 24, 2000 8:00 am
Secretary of State

05-24-2000 90050 040 ***150.00

Principal Place of Business

Mailing Address

300 6TH AVE
 PITTSBURGH PA 15222
 US

300 6TH AVE
 ATTN: TAX DEPT
 PITTSBURGH PA 15222-2514
 US

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

25-1124574

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) ☐

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	CD	<input checked="" type="checkbox"/> Delete
NAME	HORN, JERRY	
STREET ADDRESS	300 6TH AVE	
CITY-ST-ZIP	PITTSBURGH PA 15222	
TITLE	CEO	<input type="checkbox"/> Delete
NAME	WATTS, WILLIAM E	
STREET ADDRESS	300 6TH AVE	
CITY-ST-ZIP	PITTSBURGH PA 15222	
TITLE	P	<input type="checkbox"/> Delete
NAME	WATTS, WILLIAM E	
STREET ADDRESS	300 6TH AVE	
CITY-ST-ZIP	PITTSBURGH PA 15222	
TITLE	PD	<input type="checkbox"/> Delete
NAME	SANDER, JAMES	
STREET ADDRESS	300 6TH AVE	
CITY-ST-ZIP	PITTSBURGH PA 15222	
TITLE	TV	<input type="checkbox"/> Delete
NAME	KOZLOWSKI, EDWIN J.	
STREET ADDRESS	300 6TH AVE	
CITY-ST-ZIP	PITTSBURGH PA 15222	
TITLE	AS	<input type="checkbox"/> Delete
NAME	MARMO, RONALD M	
STREET ADDRESS	300 6TH AVE	
CITY-ST-ZIP	PITTSBURGH PA 15222	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	CEO AND CHAIRMAN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Ronald M. Marmo
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RONALD M. MARMO

ASSISTANT SECRETARY

4/20/00 (412) 288-2032

Date

Daytime Phone #

CR2E034 (9/99)