

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 826989

1. Entity Name

~~AUTOMATIC SWITCH COMPANY~~
AUTOMATIC SWITCH COMPANY

Principal Place of Business

Mailing Address

50-60 HANOVER RD
FLORHAM PK NJ 07932

50-60 HANOVER RD
FLORHAM PK NJ 07932

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 ~~22-3677650~~
22-1457165

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

Zip Code

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

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 re-registering)

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, 2001 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	PD	<input type="checkbox"/> Delete
NAME	AONANG, JEAN-PIERRE	
STREET ADDRESS	50-60 HANOVER ROAD	
CITY-STATE-ZIP	FLORHAM PARK NJ 07932	
TITLE	V	<input type="checkbox"/> Delete
NAME	NEELEY, MICHAEL	
STREET ADDRESS	50-60 HANOVER ROAD	
CITY-STATE-ZIP	FLORHAM PARK NJ	
TITLE	VCFO	<input checked="" type="checkbox"/> Delete
NAME	WEIDMAN, MARK C.	
STREET ADDRESS	50-60 HANOVER AVE.	
CITY-STATE-ZIP	FLORHAM PARK NJ	
TITLE	V	<input type="checkbox"/> Delete
NAME	BEVERLY, RICHARD B	
STREET ADDRESS	50-60 HANOVER ROAD	
CITY-STATE-ZIP	FLORHAM PARK NJ 07632	
TITLE	V	<input type="checkbox"/> Delete
NAME	HALE, CLARK R	
STREET ADDRESS	50-60 HANOVER ROAD	
CITY-STATE-ZIP	FLORHAM PARK NJ 07932	
TITLE	VS	<input type="checkbox"/> Delete
NAME	WALSH, CHRISTOPHER	
STREET ADDRESS	50-60 HANOVER AVE.	
CITY-STATE-ZIP	FLORHAM PARK NJ	

TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YAOLANG, Jean-Pierre	
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-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:

Christopher Walsh Christopher Walsh

4/17/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day: the Month: *

FILED

01 MAY 31 PM 12:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

754813



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

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***150.00 ***150.00

S. PAYNE JUN 1 2001