

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 834922

1. Entity Name

310/DATA CORPORATION

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90065 033 ***150.00

Principal Place of Business

Mailing Address

155 CENTENNIAL PLAZA
P.O. BOX 347
HORSHAM PA 19044-0347

155 CENTENNIAL PLAZA
P.O. BOX 347
HORSHAM PA 19044-0347

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

23-1715445

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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 PD ☐ Delete
NAME MESSA, EUGENE J
STREET ADDRESS 880 PEBBLE HILL RD.
CITY-ST-ZIP DOYLESTOWN PA

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME WILSON, VIRGINIA Q
STREET ADDRESS 12 ABERDEEN RD.
CITY-ST-ZIP CHATHAM NJ 07928

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME BELL, BARRY J
STREET ADDRESS 74 STEEPLECHASE DR.
CITY-ST-ZIP DOYLESTOWN PA

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME MESSA, MARK W.
STREET ADDRESS 297 FOX HOUND DR.
CITY-ST-ZIP DOYLESTOWN PA

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME ST. ONGE, J.
STREET ADDRESS 3010 ARCH RD.
CITY-ST-ZIP NORRISTOWN PA

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME QUICK, DONALD
STREET ADDRESS MEDFORD LEAS APT. 143
CITY-ST-ZIP MEDFORD NJ

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:

Barry J Bell VICE PRESIDENT

4/27/00

215-441-4000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #