

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 02, 2002 8:00 am**  
**Secretary of State**

05-02-2002 90105 026 \*\*\*150.00

DOCUMENT # **840330**

1. Entity Name

Frank W. Hake, Inc.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
1500 Chester Pike

Suite, Apt. #, etc.

3. Mailing Address  
1500 Chester Pike

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
Eddystone, PA 19022

Zip

Country

City & State  
Eddystone, PA 19022

Zip

Country

4. FEI Number  
23-1745638

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name

CorporateRisk Management

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

1581 Robert J. Conlan Boulevard

Suite 106

City

Palm Bay

FL

Zip Code  
32905

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) ☐

**January 1 - May 1, Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**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	TITLE	NAME	STREET ADDRESS	CITY- ST- ZIP

**DO NOT WRITE  
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

610.876.9292

Daytime Phone

CR2E034B (12/01)

Attachment FEI #23-1745638/644624

**Frank W. Hake, Inc.**  
**a Pennsylvania Corporation**

**Reg Agt:** Corporate Risk Management  
1581 Robert J. Conlan Blvd., Suite 106  
Palm Bay, FL 32905

<b>Officers:</b>	James Price	President
	Joseph J. Nestel	Executive Vice President
	E. Peter Gohn, Jr.	Vice President
	Knud C. Hansen	Vice President
	Alan Segal	Treasurer
	Carolyn K. Moir	Secretary

**Directors:** Frank W. Hake, II  
Pamela H. Hicks  
Alan Segal

**Date of Incorporation:** October 12, 1971