

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 15, 2002 8:00 am**  
**Secretary of State**

07-15-2002 90191 026 \*\*\*550.00

**DOCUMENT # 849492**

1. Entity Name  
**C.C. DICKSON CO.**

Principal Place of Business  
**P.O. BOX 36777**  
**CHARLOTTE NC 28236**

Mailing Address  
**P.O. BOX 36777**  
**CHARLOTTE NC 28236**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
**P.O. Box 13501**  
 Suite, Apt. #, etc.

3. Mailing Address  
**P.O. Box 13501**  
 Suite, Apt. #, etc.

City & State  
**Rock Hill, SC**

City & State  
**Rock Hill, SC**

Zip Country  
**29731 USA**

Zip Country  
**29731 USA**

4. FEI Number **56-0200571**

Applied For  
 Not Applicable

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

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

**PRENTICE-HALL CORPORATION SYSTEM, INC.**  
**1201 HAYS STREET**  
**SUITE 105**  
**TALLAHASSEE FL 32301**

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

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (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 \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**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 NAME STREET ADDRESS CITY-ST-ZIP	V KING, HAROLD B <del>927 E. BLVD.</del> 456 Lakeshore Parkway <del>CHARLOTTE, NC 28203</del> Rock Hill, SC 29730 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Stewart, Stephen B. 456 Lakeshore Parkway Rock Hill, SC 29730 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BORDERS, JACK H 927 E. BLVD. CHARLOTTE, NC 0 28203 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Dickson, Jr., C.C. 456 Lakeshore Parkway Rock Hill, SC 29730 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DICKSON, ROBERT T <del>927 EAST BLVD</del> 456 Lakeshore Parkway <del>CHARLOTTE NC 28203</del> Rock Hill, SC 29730 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFO Bartley, Jr., John T. 456 Lakeshore Parkway Rock Hill, SC 29730 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SANFORD, ROBERT G <del>927 E BLVD</del> 456 Lakeshore Parkway <del>CHARLOTTE, NC 0 28203</del> Rock Hill, SC 29730 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DeMao, Jack 456 Lakeshore Parkway Rock Hill, SC 29730 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRESTON, JAMES Y <del>927 E. BLVD.</del> 456 Lakeshore Parkway <del>CHARLOTTE, NC 0 28203</del> Rock Hill, SC 29730 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DURHAM, DARRELL <del>927 E BLVD</del> 456 Lakeshore Parkway <del>CHARLOTTE NC 28203</del> Rock Hill, SC 29730 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *[Signature]* **7/16/02** 803-980-8000  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **JOHN T. BARTLEY JR** Date Daytime Phone #

CR2E034 (4/02)