

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2007 8:00 am
Secretary of State

03-12-2007 90106 009 ***150.00

DOCUMENT # 856940

1. Entity Name
NUBRO, INC.



Principal Place of Business
C/O TAX DEPT
500 ARCH STREET
WILLIAMSPORT, PA 17705

Mailing Address
C/O TAX DEPT
500 ARCH STREET
WILLIAMSPORT, PA 17705

60023018



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02012007

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number

23-2248267

Applied For

Not Applicable

Zip

Country

Zip

Country

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

THE PRENTICE-HALL CORPORATION SYSTEM INC.
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME LARGEN, JOSEPH D.
STREET ADDRESS 500 ARCH ST
CITY-ST-ZIP WILLIAMSPORT, PA 17701

☐ Delete

TITLE VSD
NAME UZUPIS, STEVEN
STREET ADDRESS 500 ARCH ST
CITY-ST-ZIP WILLIAMSPORT, PA 17701

☐ Delete

TITLE D
NAME HECHLER, JONATHAN
STREET ADDRESS 603 WELLINGTON AVE
CITY-ST-ZIP SEATTLE, WA 98122

☐ Delete

TITLE T
NAME DILL, RICHARD L
STREET ADDRESS 500 ARCH ST
CITY-ST-ZIP WILLIAMSPORT, PA 17705

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

Richard L Dill Richard L Dill, Treasurer 3-5-07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #