## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED **DOCUMENT # 857734** May 24, 2000 8:00 am Secretary of State WELCOME HOME, INC. OF NO 05-24-2000 90060 021 \*\*\*200.00 Mailing Address Principal Place of Business 309 BALFIGH ST. 309 RALEIGH ST. WILMINGTON NC 28412 WILMINGTON NC 28412-6366 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number City & State 56-1379322 Not Applicable Country \$8.75 Additional $\Box$ 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD **PLANTATION FL 33324** Zip Code City 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 . (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable-FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible **10.** Election Campaign Financing **\$5.00** May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition Delete Change D TITLE NAME NAME JORDAN, JOHN W STREET ADDRESS STREET ADDRESS 9 WEST 57TH ST CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10019 ☐ Addition ☐ Change ☐ Delete TITLE NAME NAME SPIELBERGE STREET ADDRESS STREET ADDRESS 1751 LAKE COOK RD CITY-ST-7IP CITY-ST-ZIP DEERFIELD IL 60015 ☐ Change ☐ Addition ☐ Delete TITLE NAME QUINN, THOMAS STREET ADDRESS STREET ADDRESS 1751 LAKE COOL AVE CITY-ST-ZIP CITY-ST-ZIP DEERFIELD IL 60015 ☐ Addition Change ☐ Delete TITLE TITLE NAME HILLMANN, JOHN J STREET ADDRESS STREET ADDRESS 309 RALIEGH STREET CITY-ST-ZIF CITY-ST-ZIP WILMINGTON NC 28412 ☐ Delete TITLE Change Addition TITLE NAME NAME FISHER, G. ROBERT STREET ADDRESS STREET ADDRESS ONE KANSAS CITY PLACE, 35TH FL 1200 MN ST CITY-ST-ZIP CITY-ST-7/P KANSAS CITY MO 64105 Change ■ Addition ☐ Delete TITLE TITLE **VPCO** NAME NAME DUDECK, MARK STREET ADDRESS STREET ADDRESS 7522 MASONBORO SOUND RD CITY-ST-7IP 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 trusted empowers to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if of the corporation or the receiver or trustee empowe changed, or on an attachment with an address with

empowered.

TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: