

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2002 8:00 am
Secretary of State

05-16-2002 90040 037 ***150.00

DOCUMENT # F00000000167

1. Entity Name
EORIGINAL, INC.

Principal Place of Business
C/O THE WAREHOUSE AT THE CAMDEN YARDS
351 W. CAMDEN STREET, SUITE 800
BALTIMORE MD 21201

Mailing Address
C/O THE WAREHOUSE AT THE CAMDEN YARDS
351 W. CAMDEN STREET, SUITE 800
BALTIMORE MD 21201

B0104961



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

52-1975164

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

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, 2002 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 **CD** ☐ Delete
NAME **JORDAN, MICHAEL H.**
STREET ADDRESS **4140 BORNWISVILLE ROAD, SUITE 220**
CITY-ST-ZIP **PITTSBURGH PA 15227**

TITLE **D** ☐ Change ☒ Addition
NAME **Robert C. Pearson**
STREET ADDRESS **8080 N. Central Expressway # 210**
CITY-ST-ZIP **Dallas, TX 75206**

TITLE **D** ☐ Delete
NAME **WOOD, GARY B PH.D.**
STREET ADDRESS **5430 LBJ FREEWAY, #1500**
CITY-ST-ZIP **DALLAS TX 75240**

TITLE **D** ☐ Change ☒ Addition
NAME **John Dziminski**
STREET ADDRESS **100 Crescent Court, Ste 1700**
CITY-ST-ZIP **Dallas, TX 75201**

TITLE **D** ☒ Delete
NAME **TROTTER, DOUGLAS H**
STREET ADDRESS **3151 W. CAMDEN STREET, SUITE 800**
CITY-ST-ZIP **BALTIMORE MD 21201**

TITLE **D** ☐ Change ☒ Addition
NAME **Michael V. McCoy**
STREET ADDRESS **6123 DeLoache Avenue**
CITY-ST-ZIP **Dallas, TX 75205**

TITLE **PD** ☒ Delete
NAME **BISBEE, STEPHEN F**
STREET ADDRESS **3151 W. CAMDEN STREET, SUITE 800**
CITY-ST-ZIP **BALTIMORE MD 21201**

TITLE **D** ☐ Change ☒ Addition
NAME **Michael V. McCoy**
STREET ADDRESS **6123 DeLoache Avenue**
CITY-ST-ZIP **Dallas, TX 75205**

TITLE **D** ☐ Delete
NAME **MARMOL, GUILLERMO G**
STREET ADDRESS **4100 SPRING VALLEY ROAD, SUITE 750**
CITY-ST-ZIP **DALLAS TX 75244-3699**

TITLE **D** ☒ Change ☐ Addition
NAME **Marmol, Guillermo G**
STREET ADDRESS **6123 DeLoache Avenue**
CITY-ST-ZIP **Dallas, TX 75205**

TITLE **D** ☒ Delete
NAME **HUGHES, ROBERT W**
STREET ADDRESS **600 CONTRASS AVENUE, #200**
CITY-ST-ZIP **AUSTIN TX 78701**

TITLE **D** ☐ Change ☒ Addition
NAME **Craig D. Jung**
STREET ADDRESS **351 W. Camden St # 800**
CITY-ST-ZIP **Balto, MD 21201**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-8-02 410 625-5152

CR2E034 (9/01)