

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 14, 2001 8:00 am
Secretary of State

05-14-2001 90041 024 ***150.00

DOCUMENT # F00000000415

1. Entity Name

CONFERON, INC.

Principal Place of Business

2500 ENTERPRISE PARKWAY EAST
TWINSBURG OH 44087-2337

Mailing Address

2500 ENTERPRISE PARKWAY EAST
TWINSBURG OH 44087-2337

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

34-1139972

Applied For

Not Applicable

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

MANEELY, LESLIE

2224 OCEAN DRIVE SOUTH, APARTMENT 1
JACKSONVILLE BEACH FL 32250

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, 2001 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 CP ☐ Delete
NAME HARRIS, BRUCE W
STREET ADDRESS 2500 ENTERPRISE PARKWAY EAST
CITY-ST-ZIP TWINSBURG OH 44087-2337

TITLE C, P, D ☒ Change ☐ Addition
NAME Harris, Bruce W.
STREET ADDRESS 2500 Enterprise Parkway East
CITY-ST-ZIP Twinsburg Ohio 44087

TITLE VS ☐ Delete
NAME STRAUSS, ANDREW W
STREET ADDRESS 50 PUBLIC SQUARE, SUITE 4000
CITY-ST-ZIP CLEVELAND OH 44113

TITLE V, S, D ☒ Change ☐ Addition
NAME Strauss, Andrew
STREET ADDRESS 50 Public Square, Suite 4000
CITY-ST-ZIP Cleveland Ohio 44113

TITLE D ☐ Delete
NAME KOHL, STEWART A
STREET ADDRESS 50 PUBLIC SQUARE, SUITE 4000
CITY-ST-ZIP CLEVELAND OH 44113

TITLE D ☐ Change ☒ Addition
NAME Ball, Corbin
STREET ADDRESS 506 14th Street
CITY-ST-ZIP Bellingham, WA 98225

TITLE VD ☐ Delete
NAME LUTZ, DAVID J
STREET ADDRESS 2500 ENTERPRISE PARKWAY EAST
CITY-ST-ZIP TWINSBURG OH 44087-2337

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME GUERRIERO, MICHAEL S
STREET ADDRESS 2500 ENTERPRISE PARKWAY EAST
CITY-ST-ZIP TWINSBURG OH 44087-2337

TITLE T, (AND CFO, Assistant Secretary) ☒ Change ☐ Addition
NAME Guerriero, Michael S
STREET ADDRESS 2500 Enterprise Parkway East
CITY-ST-ZIP Twinsburg Ohio 44087

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 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: *Michael S. Guerriero*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael S. Guerriero

Date

4/26/01

Daytime Phone #

330-425-8333

CR2E034 (10/00)