

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2002 8:00 am
Secretary of State

0123634 AV

DOCUMENT # F00000000844

1. Entity Name

SPARTECH INDUSTRIES FLORIDA, INC.

02-27-2002 90016 024 ***150.00

Principal Place of Business

**2900 MURRELL ROAD
 ROCKLEDGE FL 32955**

Mailing Address

**2900 MURRELL ROAD
 ROCKLEDGE FL 32955**

2. Principal Place of Business

2900 Murrell Road

Suite, Apt. #, etc.

3. Mailing Address

120 S. Central Avenue

Suite, Apt. #, etc.

Suite 1700

DO NOT WRITE IN THIS SPACE



City & State

Rockledge, Florida

City & State

Clayton, Missouri

4. FEI Number

43-1876413

Applied For

Not Applicable

Zip

32955

Country

United States

Zip

63105

Country

United States

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

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.

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

TITLE **PD** ☐ Delete
 NAME **BUECHLER, BRADLEY B**
 STREET ADDRESS **120 SOUTH CENTRAL AVENUE, SUITE 1700**
 CITY-ST-ZIP **CLAYTON MO 63105**

TITLE **EVPD** ☐ Delete
 NAME **MARTIN, RANDY C**
 STREET ADDRESS **120 SOUTH CENTRAL AVENUE, SUITE 1700**
 CITY-ST-ZIP **CLAYTON MO 63105**

TITLE **S** ☐ Delete
 NAME **FISHER, JEFFREY D**
 STREET ADDRESS **120 SOUTH CENTRAL AVENUE, SUITE 1700**
 CITY-ST-ZIP **CLAYTON MO 63105**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE ☐ Change ☐ Addition
 NAME
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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 REQUIRED J. D. FISHER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/4/02

Date

314-721-4242

Daytime Phone #

CR2E034 (9/01)