

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F00000001792

1. Entity Name

SNAP-TITE HOSE, INC.

FILED
Apr 03, 2001 8:00 am
Secretary of State

04-03-2001 90093 045 ***150.00

Principal Place of Business

217 TITUSVILLE ROAD
UNION CITY PA 16438

Mailing Address

217 TITUSVILLE ROAD
UNION CITY PA 16438

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 25-1291186

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

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, 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 P
NAME BOL, PETER C ☒ Delete
STREET ADDRESS 5514 WOOD DRIVE
CITY-ST-ZIP EDINBORO PA 16412

TITLE VD
NAME CLARK, GARY L ☒ Change ☐ Addition
STREET ADDRESS 6053 VOLKMAN ROAD
CITY-ST-ZIP ERIE, PA 16506

TITLE V
NAME HARCOURT, ROBERT M ☐ Delete
STREET ADDRESS 1324 SOUTH SHORE DRIVE
CITY-ST-ZIP ERIE PA 16505

TITLE P
NAME HARCOURT, ROBERT M ☒ Change ☐ Addition
STREET ADDRESS 1324 SOUTH SHORE DRIVE
CITY-ST-ZIP ERIE, PA 16505

TITLE SD
NAME MARTIN, HARRY D ☐ Delete
STREET ADDRESS 18 MARTINWOOD DRIVE
CITY-ST-ZIP ERIE PA 16509

TITLE D
NAME CLARK, JOHN S ☐ Change ☒ Addition
STREET ADDRESS 1331 LEE ROAD
CITY-ST-ZIP WATERFORD, PA 16441

TITLE T
NAME REJZER, EUGENE F ☐ Delete
STREET ADDRESS 2038 ROUTE 97
CITY-ST-ZIP WATERFORD PA 16441

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

TITLE CD
NAME CLARK, GEORGE A ☐ Delete
STREET ADDRESS 126 BAYMIST DRIVE
CITY-ST-ZIP ERIE PA 16505

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

TITLE D
NAME CLARK, GARY L ☐ Delete
STREET ADDRESS 6053 VOLKMAN ROAD
CITY-ST-ZIP ERIE PA 16506

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)