

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 19, 2001 8:00 am
Secretary of State

04-19-2001 90065 024 ***150.00

DOCUMENT # F00000007029

1. Entity Name

HANDEX OF NEW JERSEY, INC.

Principal Place of Business

500 CAMPUS DRIVE
 MORGANVILLE, NJ 07751-1257

Mailing Address

500 CAMPUS DRIVE
 MORGANVILLE, NJ 07751-1257

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

22-2764764

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

TABOR, BILL
 30941 SUNEAGLE DR.
 MT. DORA, FL 32757-9784

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, 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

TITLE CD ☐ Delete
 NAME EATMAN, ROGER
 STREET ADDRESS 30941 SUNEAGLE DR.
 CITY-ST-ZIP MT. DORA, FLORIDA 32757-9784

TITLE PD ☐ Delete
 NAME GEORGE H. BANNON
 STREET ADDRESS 30941 SUNEAGLE DR.
 CITY-ST-ZIP MT. DORA, FLORIDA 32757 - 9784

TITLE VAS ☐ Delete
 NAME HEATH, IRVIN
 STREET ADDRESS 30941 SUNEAGLE DR.
 CITY-ST-ZIP MT. DORA, FLORIDA 32757-9874

TITLE VAS ☒ Delete
 NAME KARP, CAROL
 STREET ADDRESS 30941 SUNEAGLE DR.
 CITY-ST-ZIP MT. DORA, FL 32757-9874

TITLE VAS ☐ Delete
 NAME ANDERSON, SCOTT
 STREET ADDRESS 30941 SUNEAGLE DR.
 CITY-ST-ZIP MT. DORA, FL 32757-9874

TITLE S ☐ Delete
 NAME TABOR, WILLIAM E. JR.
 STREET ADDRESS 30941 SUNEAGLE DR.
 CITY-ST-ZIP MT. DORA, FL 32757

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
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 CITY-ST-ZIP

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NAME
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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 WILLIAM E. TABOR, JR., SECRETARY

03/26/01 (352) 735-1800

Date Daytime Phone #

CR2E034 (11/00)