

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 01, 2002 8:00 am
Secretary of State

07-01-2002 90311 002 ***158.75

DOCUMENT # F01000000927

1. Entity Name

HUNT PACIFIC MANAGEMENT CORPORATION

DO NOT WRITE IN THIS SPACE

80126149

2. Principal Place of Business
221 East Fourth Street

3. Mailing Address
221 East Fourth Street

Suite, Apt. #, etc.
Suite 2310

Suite, Apt. #, etc.
Suite 2310

City & State
Cincinnati, Ohio

City & State
Cincinnati, Ohio

4. FEI Number
330422986

Applied For
Not Applicable

Zip
45202

Country
United States

Zip
45202

Country
United States

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Paracorp Incorporated

Street Address (P.O. Box Number is Not Acceptable)
236 East 6th Avenue

City

Tallahassee

FL

Zip Code
32303

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 resigning)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☒
(See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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
NAME
STREET ADDRESS
CITY - ST - ZIP
President
Richard W. Hockema
221 East Fourth Street, #2310
Cincinnati, Ohio 45202

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Vice President
Daniel J. Weber
242 West Main Street, #104
Tustin, CA 92780

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Secretary
Patricia J. Mulrone
221 E. Fourth Street, #2310
Cincinnati, OH 45202

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Treasurer
Richard H. Day
221 E. Fourth Street, #2310
Cincinnati, OH 45202

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

By: Patricia J. Mulrone, Secretary

SIGNATURE:

Patricia J. Mulrone
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/19/2002

513/579-9700

Date

Daytime Phone #

CR2E034B (12/01)