

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000003643

Entity Name: HAZLETT-KINCAID, INC.

FILED  
Feb 12, 2002 8:00 AM  
Secretary of State

## Current Principal Place of Business:

204 SOUTH 7TH ST  
AKRON, PA 17501

## New Principal Place of Business:

## Current Mailing Address:

204 SOUTH 7TH ST  
AKRON, PA 17501

## New Mailing Address:

FEI Number: 23-2977388

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HAZLETT, TIMOTHY J  
3909 RESERVE DR., APT 726  
TALLAHASSEE, FL 32311 US

## Name and Address of New Registered Agent:

HAZLETT, TIMOTHY J  
2012-A NORTH POINT ROAD  
TALLAHASSEE, FL 32308 US

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: TIMOTHY J. HAZLETT

02/12/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PCDS ( ) Delete  
Name: HAZLETT, TIMOTHY J  
Address: 3909 RESERVE DR., APT 726  
City-St-Zip: TALLAHASSEE, FL

Title: VTD ( ) Delete  
Name: KINCAID, TODD R  
Address: 204 SOUTH 7TH STREET  
City-St-Zip: AKRON, PA

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCDS (X) Change ( ) Addition  
Name: HAZLETT, TIMOTHY J  
Address: 2012-A NORTH POINT ROAD  
City-St-Zip: TALLAHASSEE, FL 32308

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY J. HAZLETT

PCDS

02/12/2002

Electronic Signature of Signing Officer or Director

Date