

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2002 8:00 am
Secretary of State

04-23-2002 90360 039 ***150.00

DOCUMENT # F01000003763

1. Entity Name

R.P.M. MANAGEMENT OF OHIO, INC.

Principal Place of Business

9220 BONITA BEACH RD., STE 101
 BONITA SPRINGS FL 34134

Mailing Address

P.O. BOX 1167
 NAPLES FL 34106-1167

2. Principal Place of Business

3. Mailing Address

1010 5th AVE South

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 306

City & State

City & State

NAPLES, FL

Zip

Zip

34102

Country

Country

COLORED

4. FEI Number

31-1295637

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

MORRIS, DENNIS R

9220 BONITA BEACH RD., SUITE 101
 BONITA SPRINGS FL 34134

Name

Street Address (P.O. Box Number is Not Acceptable)

1010 5th AVE SOUTH, SUITE 306

City

NAPLES

FL

Zip Code

34102

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
 NAME MORRIS, DENNIS R
 STREET ADDRESS 3330 OAKLAKE CT
 CITY-ST-ZIP BONITA SPRINGS FL 34134 ☐ Delete

TITLE
 NAME
 STREET ADDRESS 575 21st AVE SOUTH
 CITY-ST-ZIP NAPLES, FL 34102 ☒ Change ☐ Addition

TITLE ST
 NAME MORRIS, PATRICIA D
 STREET ADDRESS 3330 OAKLAKE CT
 CITY-ST-ZIP BONITA SPRINGS FL 34134 ☐ Delete

TITLE
 NAME
 STREET ADDRESS 575 21st AVE SOUTH
 CITY-ST-ZIP NAPLES, FL 34102 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
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 CITY-ST-ZIP ☐ Change ☐ Addition

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

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: *Patricia D Morris* *Patricia D Morris / Secretary*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SNYDER & COMPANY
 103 E. MAIN ST., BOX 2570, LANCASTER, OH 43130 31-1336284
 4/12/02 941-403-8887

Date

Daytime Phone #

CR2E034 (9/01)