2002 Uniform Business Report (UBR)

SIGNATURE:

DOCUMENT # F18535 **Secretary of State** 1. Entity Name 03-13-2002 90125 022 ***150.00 ADVANCED PLASMA SYSTEMS, INC. Principal Place of Business Mailing Address 12000 28TH STREET N. 12000 28TH STREET N. PO BOX 21671 PO BOX 21671 ST PETERSBURG FL 33742 ST PETERSBURG FL 33742 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2073021 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WILDER, GERALD L Street Address (P.O. Box Number is Not Acceptable) 12000 28TH STREET N. ST PETERSBURG FL 33716 Zio Code City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. (9/01) ☐ Addition ☐ Change ☐ Delete TITLE DUNN, ROBERT A NAME NAME CR2E034 28601 CLEMENS RD STREET ADDRESS STREET ADDRESS **WESTLAKE OH 44145** CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE PELLECCHIA, NICHOLAS D NAME NAME STREET ADDRESS STREET ADDRESS 28601 CLEMENS RD WESTLAKE OH 44145 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE Detete TITLE ns NAME veilletter, robert e NAME STREET ADDRESS STREET ADDRESS 28601 CLEMENS RD CITY-ST-ZIP CITY-ST-ZIP Westlake oh 44145 Addition ☐ Change TITLE ☐ Delete TITLE **BIERHUIS, PETER** NAME NAME 4057 PORT CHICAGO HWY STREET ADDRESS STREET ADDRÉSS CITY-ST-ZIP CITY-ST-ZIP CONCORD CA 94520 ☐ Change ☐ Addition TITLE TITLE □ Delete NAME NAME STREET ADDRESS STREET ADDRÉSS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITI F ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRÉSS CITY-ST-ZIP 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.

Mar 13, 2002 8:00 am



Mordson Corporation
28601 Clemens Road
Westlake, Ohio 44145-1119
(440) 892-1580

February 28, 2002

Florida Department of State Uniform Business Report - Div. of Cor. P.O. Box 1500 Tallahassee, FL 32302

RE: 2002 Uniform Business Report

Dear Sir or Madam:

I have enclosed the completed 2002 Uniform Business Report submitted on behalf of Advanced Plasma Systems, Inc. Also enclosed is our company check in the amount of \$150.00 for payment of processing fees.

Thank you for your attention to this matter. If you require any additional information please do not hesitate to contact me at (440) 414-5589.

Very truly yours,

Christine Neiman Reed

Legal Assistant

Enclosure