

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90182 018 ***150.00

DOCUMENT # F93000001523

1. Entity Name
SERMATECH ENGINEERING GROUP, INC.



Principal Place of Business
**C/O TELEFLEX INC.
155 S. LIMERICK ROAD
LIMERICK PA 19468**

Mailing Address
**C/O TELEFLEX INC.
155 S. LIMERICK ROAD
LIMERICK PA 19468**

90006283



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **23-2712903**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
NAME **CARRIKER, ROY C**
STREET ADDRESS **630 WEST GERMANTOWN PIKE, SUITE 450**
CITY-ST-ZIP **PLYMOUTH MEETING PA**

TITLE **VS** ☐ Delete
NAME **CHANCE, STEVEN K**
STREET ADDRESS **630 WEST GERMANTOWN PIKE, SUITE 450**
CITY-ST-ZIP **PLYMOUTH MEETING PA**

TITLE **VPT** ☐ Delete
NAME **ZUBER, HAROLD L**
STREET ADDRESS **630 WEST GERMANTOWN PIKE, SUITE 450**
CITY-ST-ZIP **PLYMOUTH MEETING PA**

TITLE **P** ☐ Delete
NAME **BRAND, MICHAEL A**
STREET ADDRESS **11230 DEERFIELD RD**
CITY-ST-ZIP **CINCINNATI OH 45242**

TITLE **AS** ☐ Delete
NAME **SCHWARTZ, JOAN W**
STREET ADDRESS **155 S. LIMERICK ROAD**
CITY-ST-ZIP **LIMERICK PA 19468**

TITLE **D** ☐ Delete
NAME **YOUNG, MICHAEL W**
STREET ADDRESS **630 W GERMANTOWN PIKE**
CITY-ST-ZIP **PLYMOUTH MEETING PA**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **James F. McCabe** ☐ Change ☒ Addition
NAME **Dir Asst. Treasurer**
STREET ADDRESS **155 S. Limerick Rd**
CITY-ST-ZIP **Limerick, PA 19468**

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Joan W Schwartz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/03
Date

610-948-2880
Daytime Phone #

CR2E034 (10/02)