

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000003787

1. Entity Name
CIRELLI COMPANY

FILED
Sep 11, 2002 8:00 am
Secretary of State

09-11-2002 90101 050 ***150.00

Principal Place of Business
537 RITCHIE HIGHWAY, SUITE 2A
SEVERNA PARK MD 21146

Mailing Address
537 RITCHIE HIGHWAY, SUITE 2A
SEVERNA PARK MD 21146

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 52-1499183

Applied For

Not Applicable

Zip

Country

Zip

Country

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

CIRELLI, CHARLES J
24981 PENNYROYAL DRIVE
BONITA SPRINGS FL 33923

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

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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
NAME
STREET ADDRESS
CITY-ST-ZIP
CRA
CIRELLI, CHARLES J
24981 PENNYROYAL DRIVE
BONITA SPRINGS FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DV
CIRELLI, MARTHA C
24981 PENNYROYAL DRIVE
BONITA SPRINGS FL 33923 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVS
POPP, V. GAIL
2304 229TH ST
PASADENA MD 21122 ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WALLACE, JOYCE C
309 S. HARRISON ST
EASTON MD 21601 ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PT
CIRELLI, JOHN C
2030 POPLAR RIDGE RD
PASADENA MD ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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:  REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9/20/02 410-544-2602

CR2E034 (4/02)

Cirelli Company

Attachment

#93000003787 125151

537 RITCHIE HWY., SUITE 2A

SEVERNA PARK, MARYLAND 21146-2917

(410) 544-2602

FAX (410) 544-6787

August 29, 2002

Florida Department of State
Division of Corporations
P O Box 6327
Tallahassee, FL 32314

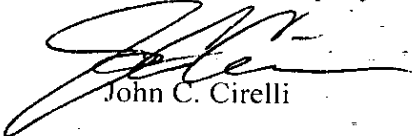
Dear Sir/Madam:

Enclosed please find our 2000 Uniform Business Report with our filing fee of \$150.00.
We respectfully request waiver of late fee because this is the first notice we have received
and we are responding promptly thereto.

Thank you in advance for your anticipated understanding in this matter.

Very truly yours,

The Cirelli Company



John C. Cirelli

JCC/lmf