

2000 UNIFORM BUSINESS REPORT (UBR)**FILED**
May 04, 2000 8:00 am
Secretary of State

05-04-2000 90095 021 ***150.00

DOCUMENT # F94000000120

1. Entity Name

BALDWIN HARDWARE SERVICE CORP.

Principal Place of Business

Mailing Address

**E. WYOMISSING BLVD
PA 19611****21001 VAN BORN RD.
TAYLOR MI 48180-1340
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

31-1252388

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

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.

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, 2000 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 **D** ☐ Delete
NAME **KENNEDY, RAYMOND F**
STREET ADDRESS **21001 VAN BORN ROAD**
CITY-ST-ZIP **TAYLOR MI 48180**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **P** ☒ Delete
NAME **PURSELL, TATE**
STREET ADDRESS **8601 HACKS CROSS RD**
CITY-ST-ZIP **OLIVE BRANCH MS 38654**TITLE **P** ☐ Change ☒ Addition
NAME **Ron Foy**
STREET ADDRESS **841 E. Wyomissing Blvd.**
CITY-ST-ZIP **Reading, PA 19611**TITLE **V** ☐ Delete
NAME **DORAN, DAVID A**
STREET ADDRESS **21001 VAN BORN ROAD**
CITY-ST-ZIP **TAYLOR MI 48180**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **DVTS** ☐ Delete
NAME **MOSTELLER, RICHARD G**
STREET ADDRESS **21001 VAN BORN ROAD**
CITY-ST-ZIP **TAYLOR MI 48180**TITLE **V-T-AS-D** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **DVS** ☐ Delete
NAME **GARGARO JR, EUGENE A**
STREET ADDRESS **21001 VAN BORN RD.**
CITY-ST-ZIP **TAYLOR MI 48180**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **VC** ☐ Delete
NAME **JAREMA, GLENN E**
STREET ADDRESS **841 E. WYOMISSNG BLVD.**
CITY-ST-ZIP **READING PA 19611**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David A. Doran 4/27/00 313/792-6162

Date

Daytime Phone #

CR2E034 (9/99)