## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # **F94000004229** Mar 02, 2000 8:00 am **Secretary of State** WELLS ALUMINUM CORPORATION 03-02-2000 90105 018 \*\*\*150.00 Principal Place of Business Mailing Address 809 GLENEAGLES COURT. STE 300 809 GLENEAGLES COURT, STE 300 **BALTIMORE MD 21286-2230** BALTIMORE MD 21286 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 35-1139550 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET, STE 105 TALLAHASSEE FL 32301 Zip Code FL 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 DATE 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 Tax filing requirement and elects to do so After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. Change Addition ☐ Delete TITLE TITLE HEISER, EDWARD R NAME NAME STREET ADDRESS STREET ADDRESS 809 GLENEAGLES COURT, STE-300-CITY-ST-ZIP CITY-ST-ZIP BALTIMORE MD Addition Change ☐ Delete TITLE TITLE KUPIEC. RUSSELL NAME NAME 809 GLENEAGLES COURT, STE 300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BALTIMORE MD □ Change ☐ Addition TITLE ☐ Delete TITLE **BROWN, LYNN** NAME NAME STREET ADDRESS 809 GLENEAGLES COURT, STE 300 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BALTIMORE MD 21286 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME ASHER, A R NAME STREET ADDRESS STREET ADDRESS 809 GLENEAGLES COURT, STE 300 CITY-ST-ZIP CITY-ST-ZIP **BALTIMORE MD** ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME RAYMONDA, DAVID J NAME STREET ADDRESS 809 GLENEAGLES CT SUITE 300 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BALTIMORE MD** □ Change ☐ Delete TITLE Addition TITLE NAME RAYMONDA, DAVID J NAME STREET ADDRESS - OTDEET ADDRESS 609 GLENEAGLES COURT, STE-300 CITY-ST-ZIP BALTIMORE MD 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 eath; 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

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