

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F94000005803 (1)**

1. Corporation Name

UNITED RESIN PRODUCTS, INC.



Principal Place of Business

**239 ROUTE 22
GREEN BROOK NJ 08812**

Mailing Address

**239 ROUTE 22
GREEN BROOK NJ 08812**

2. Principal Place of Business

2a. Mailing Address

21

26 **2200 Renaissance Blvd.**

State, Apt. #, etc.

State, Apt. #, etc.

22

27 **The Triad, Suite 200**

City & State

City & State

23

28 **Gulph Mills, PA**

Zip

Zip

Country

Country

24

29 **19406**

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0102 and 607.1503, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby, I accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0103, Florida Statutes.

SIGNATURE

Signature of person authorized to execute this document (e.g., President, Secretary, Treasurer, or other officer or director)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PCD	☒ DELETE
NAME	LODERHOSE, RICHARD E	
STREET ADDRESS	85 MAYFIELD ROAD	
CITY-STATE-ZIP	BEDMINSTER NJ	
TITLE	VS	☒ DELETE
NAME	DAVIS, BURTON D	
STREET ADDRESS	219 CANDLEWICK LANE	
CITY-STATE-ZIP	BRIDGEWATER NJ	
TITLE	TD	☒ DELETE
NAME	CHAPEL, MARIA	
STREET ADDRESS	401 ROUTE 22, WEST #52C	
CITY-STATE-ZIP	NORTH PLAINFIELD NJ	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

1. TITLE	PD	☐ Change ☒ Addition
2. NAME	Russo, Joseph D.	
3. STREET ADDRESS	25817 Clayviter Road	
4. CITY-STATE-ZIP	Hayward, CA 94545	☐ Change ☒ Addition
5. TITLE	D	☐ Change ☒ Addition
6. NAME	Wulff, Harald P.	
7. STREET ADDRESS	2200 Renaissance Blvd., Suite 200	
8. CITY-STATE-ZIP	Gulph Mills, PA 19406	☐ Change ☒ Addition
9. TITLE	S	☐ Change ☒ Addition
10. NAME	Szoke, Ernest G.	
11. STREET ADDRESS	2200 Renaissance Blvd., Suite 200	
12. CITY-STATE-ZIP	Gulph Mills, PA 19406	☐ Change ☒ Addition
13. TITLE	T	☐ Change ☒ Addition
14. NAME	Knudson, John E.	
15. STREET ADDRESS	2200 Renaissance Blvd., Suite 200	
16. CITY-STATE-ZIP	Gulph Mills, PA 19406	☐ Change ☒ Addition
17. TITLE		☐ Change ☐ Addition
18. NAME		
19. STREET ADDRESS		
20. CITY-STATE-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 resident or trustee empowered to execute the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, each accompanied with an address.

SIGNATURE:

Ernest G. Szoke
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Ernest G. Szoke, Secretary

4/3/96

610-270-8128

CR2E034 (12/95)