

2000 UNIFORM BUSINESS REPORT (UBR) ✓

DOCUMENT # F95000001697

1. Entity Name

U.S. FILTER/IONPURE, INC.

FILED
Apr 03, 2000 8:00 am
Secretary of State

04-03-2000 90121 017 ***150.00

Principal Place of Business

Mailing Address

10 TECHNOLOGY DR.
LOWELL MA 01851

40-004 COOK ST
PALM DESERT CA 92211-3299
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

04-3063901

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

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

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 PD ☐ Delete
NAME SEIDEL, ANDREW D
STREET ADDRESS 40-004 COOK STREET
CITY-ST-ZIP PALM DESERT CA 92211

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

TITLE DVS ☐ Delete
NAME STANCZAK, STEPHEN P
STREET ADDRESS 40-004 COOK STREET
CITY-ST-ZIP PALM DESERT CA 92211

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

TITLE VPC ☐ Delete
NAME SPENCE, KEVIN L
STREET ADDRESS 40-004 COOK STREET
CITY-ST-ZIP PALM DESERT CA 92260

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

TITLE V ☐ Delete
NAME BRENNEN, WILLIAM L
STREET ADDRESS 10 TECHNOLOGY DR.
CITY-ST-ZIP LOWELL MA 01851

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

TITLE VPC ☐ Delete
NAME WELCH, MICHAEL F
STREET ADDRESS 10 TECHNOLOGY DR.
CITY-ST-ZIP LOWELL MA

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

TITLE AS ☒ Delete
NAME GOSSIN, AMY G
STREET ADDRESS 40-004 COOK STREET
CITY-ST-ZIP PALM DESERT CA 92211

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

Kevin L. Spence 3/27/2000 262-521-8504

Date

Daytime Phone #

CR2F034 (9/99)