

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000002561

1. Entity Name

REPUBLIC POWDERED METALS, INC.

FILED
Jan 20, 2000 8:00 am
Secretary of State

01-20-2000 90154 013 ***150.00

Principal Place of Business

2628 PEARL ROAD
MEDINA OH 44256
US

Mailing Address

P.O. BOX 724
MEDINA OH 44122-5705
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

3735 Green Road

Suite, Apt. #, etc.

City & State

Beachwood, Ohio

Zip

44122-5730

Country

USA

4. FEI Number

34-0674388

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP
ST
TOMPKINS, P. KELLY
2628 PEARL ROAD
MEDINA OH 44256

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP
CP
KARMAN, JAMES A
2628 PEARL RD.
MEDINA OH 44256

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP
AS
RICE, RONALD A
2628 PEARL ROAD
MEDINA OH 44256

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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CITY-ST-ZIP

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:

P. Kelly Tompkins P. Kelly Tompkins 1/12/00 (330) 273-8883
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #