

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000005214

1. Entity Name

DELAWARE FORMAN ENTERPRISES, INC.

Principal Place of Business

1241 FREEDOM RD  
CRANBERRY TWP PA 16066  
US

Mailing Address

1241 FREEDOM RD  
CRANBERRY TWP PA 16066  
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

51-0369505

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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: CEO  
NAME: FORMAN, SAM  
STREET ADDRESS: 1241 FREEDOM RD  
CITY-ST-ZIP: CRANBERRY PA 16066 ☐ Delete

TITLE: VCFO  
NAME: DURRETT, KEN  
STREET ADDRESS: 1241 FREEDOM RD  
CITY-ST-ZIP: CRANBERRY TWP PA 16066 ☐ Delete

TITLE: S  
NAME: WEISS, MICHAEL  
STREET ADDRESS: 1241 FREEDOM RD  
CITY-ST-ZIP: CRANBERRY TWP PA 16066 ☒ Delete

TITLE: P  
NAME: FORMAN, BRETT  
STREET ADDRESS: 1241 FREEDOM RD  
CITY-ST-ZIP: CRANBERRY TWP PA 16066 ☐ Delete

TITLE: D  
NAME: ASHINOFF, LARRY  
STREET ADDRESS: 1241 FREEDOM RD  
CITY-ST-ZIP: CRANBERRY TWP PA 16066 ☐ Delete

TITLE: D  
NAME: HECHT, DONALD  
STREET ADDRESS: 1241 FREEDOM RD  
CITY-ST-ZIP: CRANBERRY TWP PA 16066 ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: DIRECTOR  
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:   
☒ Change ☐ Addition

TITLE: PRESIDENT & CEO  
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:   
☒ Change ☐ Addition

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

TITLE: DIRECTOR  
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:   
☒ Change ☐ Addition

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

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

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]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/12/00

Daytime Phone #

**FILED**  
**Sep 11, 2000 8:00 am**  
**Secretary of State**

06-22-2000 90105 024 \*\*\*150.00

09-11-2000 90022 001 \*\*\*550.00

00102700



DO NOT WRITE IN THIS SPACE

CR2F034 15/000