

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 12, 2000 8:00 am**  
**Secretary of State**

09-12-2000 90051 001 \*\*\*150.00  
09-12-2000 90051 002 \*\*\*400.00

20536



DO NOT WRITE IN THIS SPACE

<b>DOCUMENT # F96000001410</b>			
<b>1. Entity Name</b> <b>AMERICAN HARD CIDER COMPANY, INC.</b>			
<b>Principal Place of Business</b> 8 PLEASANT STREET, UNIT D SOUTH NATICK MA 01760 US		<b>Mailing Address</b> 8 PLEASANT STREET, UNIT D SOUTH NATICK MA 01760 US	
<b>2. Principal Place of Business</b> Suite, Apt. #, etc. City & State Zip		<b>3. Mailing Address</b> Suite, Apt. #, etc. City & State Zip	
<b>4. FEI Number</b> 04-3176598		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>			
<b>6. Name and Address of Current Registered Agent</b> C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			
<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
<b>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.</b>			
<b>SIGNATURE</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
<b>9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.</b> <input type="checkbox"/> <small>(See criteria on back)</small>		<b>FILE NOW!!! FEE IS \$550.00</b> <b>After SEPTEMBER 13, 2000 Min. will be \$750.00</b> <b>Make Check Payable to Department of State</b>	
<b>10. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>11. OFFICERS AND DIRECTORS</b>		<b>12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>PTD</b> FLYNN, EDWARD K 200 NEWTON STREET WESTON MA 02193 <input checked="" type="checkbox"/> Delete	<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>CEO &amp; Director</b> KNIBBS, DAVID 8-D Pleasant St South Natick, MA 01760 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>C</b> FLYNN, DIANE R 200 NEWTON ST. WESTON MA 02193 <input checked="" type="checkbox"/> Delete	<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>Director and VP-Sales</b> GRINDSTAFF, MARK 8-D Pleasant St. South Natick, MA 01760 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> FLYNN, PAUL L JR 330 BEACON STREET, #93 BOSTON MA 02116 <input checked="" type="checkbox"/> Delete	<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>Director &amp; VP</b> ASHLEY, JR., JAMES W. 115 S. LaSalle St. Chicago, IL 60603 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> VALETTE, JEAN-MICHEL 28 MAPLE AVENUE KENTFIELD CA 94904 <input checked="" type="checkbox"/> Delete	<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>Director</b> HARVEY, JOHN M. The Cider Mills, Plough Lane Hereford, MR4 OLE England <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> THREADGOLD, WILLIAM 7 COLUMBIA ST. FRAMINGHAM MA 01702 <input checked="" type="checkbox"/> Delete	<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>Director</b> DANIELS, ROGER M. The Cider Mills, Plough Lane Hereford, HR4 OLE England <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>Clerk/Secretary</b> HITCHINER, DAVID The Cider Mills, Plough Lane Hereford, MR4 OLE England <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

CR2E034 (5/00)

**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 REQUIRED** Vice President 9/6/00 312-443-1873  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

attachment  
# F9600000 1410  
20536

**LORD, BISSELL & BROOK**

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CHICAGO, ILLINOIS 60603

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TELEX: 25-3070  
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PERSONAL FACSIMILE: (312) 896-6289

September 6, 2000

INGRID J. SCHECKEL  
(312) 443-0289  
ISCHECKE@LORDBISSELL.COM

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LONDON OFFICE  
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1 LIME STREET  
LONDON EC3M 700 ENGLAND  
0171-327-4534  
FACSIMILE: 0171-929-2250

Annual Report Filings  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500


Re: American Hard Cider Company, Inc.

Dear Sir or Madam:

Enclosed are the 2000 Annual Report for American Hard Cider Company, Inc. and checks in the amount of \$150.00 and \$400.00 for the filing fee and penalty.

If you have any questions, please call me.

Very truly yours,



Ingrid J. Scheckel  
Legal Assistant

3206800-0001  
Enclosures

cc: James W. Ashley, Jr.