

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000001542

1. Entity Name

CRISPLANT INC.

FILED
Feb 26, 2000 8:00 am
Secretary of State

02-26-2000 90016 034 ***150.00

Principal Place of Business

7495 NEW TECHNOLOGY WAY
FREDERICK MD 21703-9401
US

Mailing Address

7495 NEW TECHNOLOGY WAY
FREDERICK MD 21703-9401
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

52-1681719

Applied For

Not Applicable

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 SOUTH PINE ISLAND ROAD
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 P ☐ Delete
NAME SMALLWOOD, D J SR
STREET ADDRESS ARCHER LANE
CITY-ST-ZIP WILIAMSPORT MD 21795

TITLE President ☒ Change ☐ Addition
NAME David Martin
STREET ADDRESS 775 Upper Salt River Rd
CITY-ST-ZIP Danville KY 40422

TITLE S ☐ Delete
NAME RISOM, BENT
STREET ADDRESS PEDERSENS VEJ 10Q
CITY-ST-ZIP DK-8200 AARHUS DENMARK

TITLE Secretary ☒ Change ☐ Addition
NAME Robert Miller
STREET ADDRESS 5 Winslow Rd
CITY-ST-ZIP Weston, CT 06883

TITLE T ☐ Delete
NAME LAURSEN, SOREN
STREET ADDRESS PEDERSENS VEJ 10Q
CITY-ST-ZIP DK-8200 AARHUS DENMARK

TITLE Treasurer ☒ Change ☐ Addition
NAME David Teach
STREET ADDRESS 13001 Houck Rd
CITY-ST-ZIP Union Bridge, MD 21791

TITLE COB ☐ Delete
NAME EBBE FUNK
STREET ADDRESS PO PEDERSENS VE, 10
CITY-ST-ZIP AARHUS DE

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)