

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000006225

1. Entity Name

PHILLIPS POINT ACQUISITION CORP.

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

04-03-2000 90196 026 ***150.00

Principal Place of Business

Mailing Address

1000 ELM STREET
MANCHESTER NH 03105-3701

1 MILL POND LANE
SIMSBURY CT 06070-2486
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 02-0492834

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

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 PD ☐ Delete

NAME HOLMES, WILLIAM H
STREET ADDRESS ONE MILL POND LANE
CITY-ST-ZIP SIMSBURY CT

TITLE ☐ Change ☐ Addition

TITLE VD ☐ Delete

NAME JEPEAL, JAMES D
STREET ADDRESS ONE MILL POND LANE
CITY-ST-ZIP SIMSBURY CT

TITLE ☐ Change ☐ Addition

TITLE T ☒ Delete

NAME ~~SWEENEY, JOHN M~~
STREET ADDRESS ONE MILL POND LANE
CITY-ST-ZIP SIMSBURY CT

TITLE ~~Hart, David S.~~ ☒ Change ☐ Addition

TITLE S ☐ Delete

NAME CLEVELAND, ALAN P
STREET ADDRESS 1000 ELM ST., P.O. BOX 3701
CITY-ST-ZIP MANCHESTER NH

TITLE ☐ Change ☐ Addition

TITLE VP ☐ Delete

NAME MOLLOY, JOHN C
STREET ADDRESS ONE MILL POND LANE
CITY-ST-ZIP SIMSBURY CT

TITLE ☐ Change ☐ Addition

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 an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)