

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2002 8:00 am
Secretary of State

02-05-2002 90066 011 ***150.00

0624398 AT

DOCUMENT # F97000000048

1. Entity Name
CVF CORP.

Principal Place of Business
54500 MEADOWBROOK LANE
ELKHART IN 46514

Mailing Address
317 W. FRANKLIN ST
ELKHART IN 46516

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
35-2000373

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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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, 2002 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 NAME STREET ADDRESS CITY-ST-ZIP	PD GLON, CAROLYN S 54500 MEADOWBANK LN ELKHART IN	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WEAVER, KENNARD R 317 W. FRANKLIN ST ELKHART IN 46516	☐ Delete
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 21, 2002

Date

219-296-6000

Daytime Phone #

CR2E034 (9/01)

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SIGNATURE: **SIGNATURE REQUIRED**

BAKER & DANIELS
EST. 1863

317 W. FRANKLIN STREET, P.O. BOX 507 · ELKHART, INDIANA 46515-0507 · (574) 296-6000 · FAX (574) 296-6001 · www.bakerdaniels.com

AUBREY L. RETTIG
PARALEGAL
DIRECT (574) 296-6025
e-mail: alrettig@bakerd.com

ELKHART
INDIANAPOLIS
FORT WAYNE
SOUTH BEND
WASHINGTON, D.C.
QINGDAO, P.R. CHINA

January 22, 2002

Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

RE: CVF Corp.

Dear Sir/Madam:

Enclosed find the original and one copy of executed document F9700000048, 2001 Uniform Business Report (UBR) and our check No.100325 in the amount of \$150.00 as filing fee for CVF Corp. Please return the copy, file-stamped, to me. A return envelope has been enclosed for your convenience.

If you have any questions or comments, do not hesitate to contact me.

Sincerely,

BAKER & DANIELS


Aubrey L. Rettig
Paralegal

ALR/
Enclosures
cc: Kennard R. Weaver (w/o enc.)