

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F97000000562**

1. Entity Name

MYERS INDUSTRIES INTERNATIONAL, INC.

Principal Place of Business

**1293 S. MAIN ST.
AKRON OH 44301**

Mailing Address

**1293 S. MAIN ST.
AKRON OH 44301**

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 **34-1059277**

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, 2001 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	PDC	☐ Delete
NAME	MYERS, STEPHEN E	
STREET ADDRESS	1293 S. MAIN ST.	
CITY-ST-ZIP	AKRON OH 44301	

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

TITLE	VDC	☐ Delete
NAME	WISKIND, MILTON I	
STREET ADDRESS	1293 S. MAIN ST.	
CITY-ST-ZIP	AKRON OH 44301	

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

TITLE	ST	☐ Delete
NAME	STODNICK, GREGORY J	
STREET ADDRESS	1293 S. MAIN ST.	
CITY-ST-ZIP	AKRON OH 44301	

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

TITLE	D	☐ Delete
NAME	HAY, KARL S	
STREET ADDRESS	500 FIRST NATIONAL TOWER	
CITY-ST-ZIP	AKRON OH 44308-1471	

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

HILTON I WISKIND

Date

4/27/01

Daytime Phone #

FILED
May 02, 2001 8:00 am
Secretary of State

05-02-2001 90076 021 ***150.00

B0044180

DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)