

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91845 020 ***150.00

DOCUMENT # F97000001176

1. Entity Name
TRIUMPH/JDC COMPANY



Principal Place of Business
**5500 NW 21 TERR
FT LAUDERDALE AIRPORT HANGER #7
FT LAUDERDALE FL 33309
US**

Mailing Address
**1255 DRUMMERS LN #200
WAYNE PA 19087**



2. Principal Place of Business

3. Mailing Address
1550 Liberty Ridge Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.
Suite 100

☐ CHECK HERE IF MAKING CHANGES

City & State

City & State

Wayne, PA

4. FEI Number **23-2884213**

Applied For
Not Applicable

Zip

Country

Zip

Country

19087

U.S.A.

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

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DC** ☐ Delete
NAME **ILL, RICHARD C**
STREET ADDRESS **1255 DRUMMERS LN #200**
CITY-ST-ZIP **WAYNE PA 19087**

☒ Change ☐ Addition
TITLE
NAME
STREET ADDRESS **1550 Liberty Ridge Dr., Suite 100**
CITY-ST-ZIP **Wayne, PA 19087**

TITLE **VT** ☐ Delete
NAME **BARTHOLDSON, JOHN R**
STREET ADDRESS **1255 DRUMMERS LN #200**
CITY-ST-ZIP **WAYNE PA 19087**

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS **1550 Liberty Ridge Drive, Suite 100**
CITY-ST-ZIP **Wayne, PA 19087**

TITLE **S** ☐ Delete
NAME **EISENSTAEDT, RICHARD M**
STREET ADDRESS **1255 DRUMMERS LN #200**
CITY-ST-ZIP **WAYNE PA 19087**

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS **1550 Liberty Ridge Drive, Suite 100**
CITY-ST-ZIP **Wayne, PA 19087**

TITLE **P** ☐ Delete
NAME **VORSAS, DAVID**
STREET ADDRESS **5520 NW 21 TERR, HANGAR #7**
CITY-ST-ZIP **FORT LAUDERDALE FL 33309**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE REQUIRED
John R. Bartholdson

7/28/03

610-251-1000
Daytime Phone #

CR2E034 (10/02)