

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000001501

1. Entity Name

DUPONT COMMERCIAL FLOORING SYSTEMS, INC.

FILED
May 12, 2000 8:00 am
Secretary of State

05-12-2000 90061 030 ***150.00

Principal Place of Business

Mailing Address

175 TOWN PARK DRIVE
SUITE 400
KENNESAW GA 30144

C/O E.I. DU PONT DE NEMOURS & CO.
1007 MARKET STREET, D-13039
WILMINGTON DE 19898-0001

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

94-3019044

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

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.

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
NAME
STREET ADDRESS
CITY-ST-ZIP
CCEO
FINDLAY, DAVID K
175 TOWN PARK DRIVE, SUITE 400
KENNESAW GA 30144 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
GARY HOLCOMB
175 TOWN PARK DRIVE, SUITE 400
KENNESAW, GA 30144 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PCOO
SILVERBERG, DEBORAH L
175 TOWN PARK DRIVE, SUITE 400
KENNESAW GA 30144 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CFO
JAMES E. DEUTZER
175 TOWN PARK DRIVE, SUITE 400
KENNESAW, GA 30144 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
RUMER, JAMES C
175 TOWN PARK DRIVE, SUITE 400
KENNESAW GA 30144 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
PETE BENNET
175 TOWN PARK DRIVE, SUITE 400
KENNESAW, GA 30144 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AT
REVIT, HOWARD R
175 TOWN PARK DRIVE, SUITE 400
KENNESAW GA 30144 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GARY HOLCOMB
175 TOWN PARK DRIVE, SUITE 400
KENNESAW, GA 30144 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PCOO
SILVERBERG, DEBORAH L
175 TOWN PARK DRIVE, SUITE 400
KENNESAW GA 30144 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DAVID K. FINDLAY
175 TOWN PARK DRIVE, SUITE 400
KENNESAW, GA 30144 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AS
LEA, LORIANN
1007 MARKET ST
WILMINGTON DE 19898 ☐ Delete

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

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 #

4/27/00