

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 02, 2003 8:00 am**  
**Secretary of State**

04-02-2003 90097 012 \*\*\*150.00

**DOCUMENT # F97000001674**

1. Entity Name

**B&W SERVICE COMPANY**



Principal Place of Business

**PO BOX 665  
BARBERTON OH 44203**

Mailing Address

**C/O TAX DEPT  
PO BOX 61038  
NEW ORLEANS LA 70161**

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 **31-1492113**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

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. 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

**SEE ATTACHED LISTING**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>SHOPF, R. J.</b> <b>1615 POYDRAS STREET</b> <b>NEW ORLEANS LA 70112</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>1450 POYDRAS STREET</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD</b> <b>KULIG, J. S.</b> <b>20 S. VAN BUREN AVENUE</b> <b>BARBERTON OH 44203</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>HENZLER, THOMAS A</b> <b>1450 POYDRAS ST</b> <b>NEW ORLEANS LA 70112</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ASSISTANT SECRETARY</b> <b>JILL J. DOLHONDE</b> <b>1450 POYDRAS STREET</b> <b>NEW ORLEANS, LA 70112</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>JOLLIFF, ROBERT A</b> <b>1450 POYDRAS ST</b> <b>NEW ORLEANS LA 70112</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>HINRICHS, L. K.</b> <b>1450 POYDRAS STREET</b> <b>NEW ORLEANS LA 70112</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AS</b> <b>STUMPF, ROBERT E</b> <b>1450 POYDRAS ST</b> <b>NEW ORLEANS LA 70112</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: J. J. Dolhonde** **J. J. Dolhonde, ASST. SECRETARY** **03/21/03** **(504) 587-4411**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

# ATTACHMENT

10053439  
F97000001674

B&W SERVICE COMPANY  
OFFICERS AND DIRECTORS LISTING

## Officers

President and  
and General Manager

J.S. Kulig

## Business Address

20 S. Van Buren Avenue  
Barberton, OH 44203

Treasurer

R.A. Jolliff

1450 Poydras Street  
New Orleans, LA 70112

Assistant Treasurer

C.W. Dickenson

20 S. Van Buren Avenue  
Barberton, OH 44203

Secretary

L.K. Hinrichs

1450 Poydras Street  
New Orleans, LA 70112

Assistant Secretary

Jill J. Dolhonde

1450 Poydras Street  
New Orleans, LA 70112

Assistant Secretary

M.J. Grady

20 S. Van Buren Avenue  
Barberton, OH 44203

Assistant Secretary

R.E. Stumpf

1450 Poydras Street  
New Orleans, LA 70112

## Directors

J.S. Kulig

20 S. Van Buren Avenue  
Barberton, OH 44203

D.L. Keller

20 S. Van Buren Avenue  
Barberton, OH 44203

R.J. Shopf

1450 Poydras Street  
New Orleans, LA 70112