

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000003443

1. Entity Name
CLOVER TECHNOLOGIES, INC.

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

05-02-2001 90037 032 ***150.00

Principal Place of Business

Mailing Address

ONE CLOVER CT.
WIXOM MI 48393-2311

30 S. WACKER DRIVE
TAX DEPT. 36TH FLOOR
CHICAGO IL 60606

2. Principal Place of Business

3. Mailing Address

One Clover Court

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Wixom MI

Zip

Country

Zip

Country

48393

4. FEI Number 38-1795964

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 P
NAME KRUXZEWSKI, LEONARD A
STREET ADDRESS ONE CLOVER COURT
CITY-ST-ZIP WIXOM MI 48393 ☒ Delete

TITLE CEO
NAME HIRAM E. JACKSON
STREET ADDRESS ONE CLOVER COURT
CITY-ST-ZIP Wixom MI 48393 ☐ Change ☒ Addition

TITLE PT
NAME KRUSZEWSKI, LEONARD A
STREET ADDRESS ONE CLOVER COURT
CITY-ST-ZIP WIXOM MI 48393 ☒ Delete

TITLE CFO
NAME Ajoy Sharma
STREET ADDRESS ONE CLOVER COURT
CITY-ST-ZIP WIXOM MI 48393 ☐ Change ☒ Addition

TITLE S
NAME CROTEAU, SUE
STREET ADDRESS ONE CLOVER COURT
CITY-ST-ZIP WIXOM MI 48393 ☒ Delete

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

TITLE VS
NAME GOLD, DEIDRA D
STREET ADDRESS 30 S. WACKER DRIVE
CITY-ST-ZIP CHICAGO IL 60606 ☒ Delete

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

TITLE AS
NAME HANES-DOWD, APRIL
STREET ADDRESS 30 S. WACKER DRIVE
CITY-ST-ZIP CHICAGO IL 60606 ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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 #

AJOY SHARMA, CFO Clover Technologies

CR2E034 (10/00)

Hachmen.t



835469

#F97000003443

April 26, 2001

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

RE: 2001 Uniform Business Report

Dear Sir/Madam;

Enclosed please find the 2001 UBR as well as Clover's check number 8326 in the amount of \$150.00 for the cost of filing this report.

Should you have any questions or comments with respect to this matter, please do not hesitate to call me at (248) 449-4797 x1563.

Sincerely yours,

Denise E. Latin
Director of Contract Management