

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000006173

1. Entity Name

TME MANAGEMENT CORP.

Principal Place of Business

TYCO PARK
NH 03833

Mailing Address

ONE TOWN CENTER ROAD
BOCA RATON FL 33486-1002

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. **TYCO INTERNATIONAL (US) INC.**

**ONE TOWN CENTER ROAD
P.O. BOX 5035
BOCA RATON, FL 33431-0835**

City & State

Zip

Country

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90427 004 ***150.00

049247



DO NOT WRITE IN THIS SPACE

4. FEI Number **02-0493878**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PCD	KOZLOWSKI, L. DENNIS	TWO TYCO PARK	EXETER NH 03833	<input type="checkbox"/>
VD	GUTIN, IRVING	TWO TYCO PARK	EXETER NH 03833	<input type="checkbox"/>
VD	SWARTZ, MARK H	TWO TYCO PARK	EXETER NH 03833	<input type="checkbox"/>
V	GUARNIERI, JOHN J	TWO TYCO PARK	EXETER NH 03833	<input checked="" type="checkbox"/>
S	MOROZE, M. BRIAN	TWO TYCO PARK	EXETER NH 03833	<input type="checkbox"/>
T	ROBINSON, MICHAEL A	ONE TOWN CENTER PARK	BOCA RATON FL 33486	<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
VP/Asst. Treasurer	Scott Stevenson	One Town Center Rd	Boca Raton FL 33486	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 any other like empowered.

SIGNATURE:

Scott Stevenson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING

Scott Stevenson
Vice President/Asst. Treasurer

4/25/01
Date

(561) 988-7823
Daytime Phone #

CR2E034 (9/99)