

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000006454

1. Entity Name
DSET CORPORATION

Principal Place of Business

1160 US HIGHWAY 22
BRIDGEWATER NJ 08807
US

Mailing Address

1160 US HIGHWAY 22
BRIDGEWATER NJ 08807
US

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 22-3000022

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 PD
NAME MCHALE, WILLIAM JR
STREET ADDRESS 1160 US HIGHWAY 22
CITY-ST-ZIP BRIDGEWATER NJ 08807 ☐ Delete

TITLE P/C
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE CD
NAME SHIA, DAN
STREET ADDRESS 1160 US HIGHWAY 22
CITY-ST-ZIP BRIDGEWATER NJ 08807 ☒ Delete

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

TITLE TS
NAME BOYKAS, SUSAN M
STREET ADDRESS 1160 US HIGHWAY 22
CITY-ST-ZIP BRIDGEWATER NJ 08807 ☒ Delete

TITLE S
NAME Crowell, Bruce
STREET ADDRESS 1160 US Highway 22
CITY-ST-ZIP Bridgewater, NJ 08807 ☒ Change ☒ Addition

TITLE V
NAME SMITH, PAUL
STREET ADDRESS 1160 US HIGHWAY 22
CITY-ST-ZIP BRIDGEWATER NJ 08807 ☐ Delete

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

TITLE D
NAME GOLDBERG, JACOB J
STREET ADDRESS 1160 US HIGHWAY 22
CITY-ST-ZIP BRIDGEWATER NJ 08807 ☐ Delete

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

TITLE D
NAME YOST, DAN
STREET ADDRESS 1950 STEMHOAS FRWY
CITY-ST-ZIP DALLAS TX 75207 ☐ 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

1/18/01
Date

908-526-7500
Daytime Phone #

CR2E034 (10/00)