

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2001 8:00 am
Secretary of State
 04-26-2001 90134 001 ***150.00

DOCUMENT # F97000006619

1. Entity Name
WHC PAYROLL COMPANY

Principal Place of Business

777 WESTCHESTER AVE
 WEST HARRISON NY 10604
 US

Mailing Address

2231 E CAMELBACK RD
 STE 400
 PHOENIX AZ 85016
 US

749550



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **91-1875047**

Applied For
 Not Applicable

Zip

Country

Zip

Country

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

Street Address (P.O. Box Number is Not Acceptable)

City

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** ☐ Delete
 NAME **DARNALL, THEODORE W**
 STREET ADDRESS **777 WESTCHASTER AVE**
 CITY-ST-ZIP **WHITE PLAINS NY 10604**

TITLE **PD** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VT** ☐ Delete
 NAME **ROZELLS, MARK**
 STREET ADDRESS **2231 E CAMELBACK RD, STE 400**
 CITY-ST-ZIP **PHOENIX AZ 85016**

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

TITLE **VS** ☒ Delete
 NAME **JANSON, THOMAS C JR**
 STREET ADDRESS **777 WESTCHESTER AVE**
 CITY-ST-ZIP **WHITE PLAINS NY 10604**

TITLE **VS** ☒ Change ☒ Addition
 NAME **Latham, James D.**
 STREET ADDRESS **777 Westchester Ave.**
 CITY-ST-ZIP **White Plains, NY 10604**

TITLE **AT** ☐ Delete
 NAME **MORROW, PETER**
 STREET ADDRESS **2231 E CAMELBACK RD, STE 400**
 CITY-ST-ZIP **PHOENIX AZ 85016**

TITLE **VAT** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **AT** ☐ Delete
 NAME **SCHNAID, ALAN M**
 STREET ADDRESS **2231 E CAMELBACK RD, STE 400**
 CITY-ST-ZIP **PHOENIX AZ 85016**

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

TITLE **AT** ☐ Delete
 NAME **BROWN, RONALD C**
 STREET ADDRESS **777 WESTCHESTER AVE**
 CITY-ST-ZIP **WHITE PLAINS NY 10604**

TITLE **VTD** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

Peter Morrow
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Peter Morrow

4-17-01

Date

(602) 852-3900

Daytime Phone #

CR2E034 (10/00)