

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000001798

1. Entity Name

UNITED ROAD SERVICES, INC.

FILED

02 SEP 25 AM 10:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

17 COMPUTER DRIVE WEST
ALBANY NY 12205
US

Mailing Address

17 COMPUTER DRIVE WEST
ALBANY NY 12205
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 94-3278455

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO
RIORDAN, GERARLD
108 GLENMOOR DRIVE
ENGLEWOOD CO 80110 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VCFO
MARR, DONALD J
8 AUTOMATION LANE
ALBANY NY 12205 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VCFO
Patrick J. Fodale
500 East 77th Street, #635
New York, NY 10162 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
MCGINN, RICHARD P
17 COMPUTER DRIVE WEST
ALBANY NY 12205 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P/cOO
Michael Wysocki
1737 Rolling Woods Circle
Northville, MI 48167 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
MOSCINSKI, MICHAEL T
17 COMPUTER DRIVE WEST
ALBANY NY 12205 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P/cOO
Harold W. Borhauer
6940 W. Acoma
Peoria, AZ 85381 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
7000008048757-5
-09/26/02--01035-014
****750.00 ****750.00 ☐ 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:

Patrick J. Fodale
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/18/02 (518) 446-0140
Date Daytime Phone #

CR2E034 (4/02)