

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2002 8:00 am
Secretary of State
 05-10-2002 90061 006 ***150.00

OFFICER
AT

DOCUMENT # F98000001991

1. Entity Name

MILL'S PRIDE PREMIER, INC.

Principal Place of Business

**250 SOUTH AUSTRALIAN AVENUE, 13TH FLOOR
 WEST PALM BEACH FL 33401**

Mailing Address

**C/O TAX DEPARTMENT
 21001 VAN BORN ROAD
 TAYLOR MI 48180-1340**

2. Principal Place of Business

423 Hopewell Road

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Waverly, OH

City & State

City & State

4. FEI Number

31-1590652

Applied For

Not Applicable

Zip

45690

Country

US

Zip

Zip

Country

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

**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 reinstalling)

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, 2002 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 **PAST** ☐ Delete
 NAME **CONNELLY, MICHAEL**
 STREET ADDRESS **250 SOUTH AUSTRALIAN AVENUE, 13TH FLOOR**
 CITY-ST-ZIP **WEST PALM BEACH FL 33401**

TITLE **P/AS/AT** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VD** ☐ Delete
 NAME **KENNEDY, RAYMOND F**
 STREET ADDRESS **21001 VAN BORN ROAD**
 CITY-ST-ZIP **TAYLOR MI 48180-1340**

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

TITLE **VTAS** ☒ Delete
 NAME **MOSTELLER, RICHARD G**
 STREET ADDRESS **21001 VAN BORN ROAD**
 CITY-ST-ZIP **TAYLOR MI 48180-1340**

TITLE **V/T/AS** ☐ Change ☒ Addition
 NAME **Robert B. Rosowski**
 STREET ADDRESS **21001 Van Born Road**
 CITY-ST-ZIP **Taylor, MI 48180-1340**

TITLE **VSD** ☐ Delete
 NAME **GARGARO, EUGENE A JR**
 STREET ADDRESS **21001 VAN BORN ROAD**
 CITY-ST-ZIP **TAYLOR MI 48180-1340**

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

TITLE **V** ☐ Delete
 NAME **DORAN, DAVID A**
 STREET ADDRESS **21001 VAN BORN ROAD**
 CITY-ST-ZIP **TAYLOR MI 48180-1340**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ 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:

SIGNATURE REQUIRED

David A. Doran

4/25/02

313/792-6162

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)