

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2003 8:00 am
Secretary of State

05-01-2003 90141 018 ***150.00

DOCUMENT # F98000002226

1. Entity Name
1-800-RECONEX, INC.



Principal Place of Business
2500 INDUSTRIAL AVE.
HUBBARD OR 97032

Mailing Address
2500 INDUSTRIAL AVE.
HUBBARD OR 97032

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 **93-1242033**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

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. 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

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
GRIFFEE, DAVE
2500 INDUSTRIAL AVE.
HUBBARD OR 97032
President ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
lan Irwin
2500 Industrial Ave.
Hubbard OR 97032
Director ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
BRANDES, JOSEPH
2500 INDUSTRIAL AVE.
HUBBARD OR 97032
Vice-President ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Dave Griffiee
2500 Industrial Ave.
Hubbard OR 97032
Director ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
BRAUN, WILLIAM E
2500 INDUSTRIAL AVE.
HUBBARD OR 97032
General Counsel ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Todd Meislahn
2500 Industrial Ave.
Hubbard OR 97032
Director ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
POWERS, DALE
2500 INDUSTRIAL AVE
HUBBARD OR 97032
☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Peter Stein
2500 Industrial Ave.
Hubbard OR 97032
Director ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DC
PATTERSON, DAN
2500 INDUSTRIAL
HUBBARD OR 97032
Director ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Dan Patterson
2500 Industrial Ave.
Hubbard OR 97032
Director ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Heil Irwin
2500 Industrial Ave.
Hubbard OR 97032
Director ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

4/28/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)