

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2002 8:00 am
Secretary of State

03-06-2002 90100 010 ***150.00

DOCUMENT # F98000003272

1. Entity Name
TWITCHELL CORPORATION

Principal Place of Business

4031 ROSS CLARK CIRCLE. NW
PO BOX 8156
DOTHAN AL 36304

Mailing Address

4031 ROSS CLARK CIRCLE. NW
PO BOX 8156
DOTHAN AL 36304

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

63-1202327

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

UNITED CORPORATE SERVICES, INC.
9200 SOUTH DADELAND BLVD.
SUITE 508
MIAMI FL 33156-0000

7. Name and Address of New Registered Agent

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, 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

TITLE **D** ☐ Delete
NAME **DENNY, CHARLES**
STREET ADDRESS **7179 TORY LANE**
CITY-ST-ZIP **NAPLES FL 34108**

TITLE **D** ☒ Delete
NAME **KRACUM, RICHARD P**
STREET ADDRESS **676 N MICHIGAN AVENUE**
CITY-ST-ZIP **CHICAGO IL 60611**

TITLE **D** ☐ Delete
NAME **WATSON, JOHN H**
STREET ADDRESS **488 ROSS CLARK CIRCLE NE**
CITY-ST-ZIP **DOTHAN AL 36303**

TITLE **D** ☐ Delete
NAME **SIMMER, DAVID R**
STREET ADDRESS **7 W SQUARE LAKE ROAD**
CITY-ST-ZIP **BLOOMFIELD HILLS MI 48302**

TITLE **D** ☒ Delete
NAME **FIEDOROWICZ, JOHN M**
STREET ADDRESS **4031 ROSS CLARK CIRCLE NW**
CITY-ST-ZIP **DOTHAN AL 36303**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE **D** ☐ Change ☒ Addition
NAME **John B. Yasinsky**
STREET ADDRESS **1984 Stockbridge Rd.**
CITY-ST-ZIP **AKron, OH 44313**

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

TITLE ☒ Change ☐ Addition
NAME **Zimmer, David R.**
STREET ADDRESS
CITY-ST-ZIP **Spelling Error**

TITLE ☐ Change ☒ Addition
NAME **Chris Brooks**
STREET ADDRESS **115 Arcadia Dr.**
CITY-ST-ZIP **Dothan, AL 36305**

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 of David R. Zimmer
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-18-02

Date

(334) 792-0002

Daytime Phone #

CR2E034 (9/01)