

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000003275

1. Entity Name

THE DELAWARE COAST DISTRIBUTION SYSTEM, INC.

FILED
Feb 16, 2000 8:00 am
Secretary of State

02-16-2000 90033 038 ***150.00

Principal Place of Business

Mailing Address

350 WOODVIEW AVE
MORGAN HILL CA 95037
US

1982 ZANKER ROAD
SAN JOSE CA 95112-4216

2. Principal Place of Business

3. Mailing Address

PO Box 1449

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
MORGAN HILL, CA

4. FEI Number

94-2490990

Applied For

Not Applicable

Zip

Country

Zip
95038-1449

Country
USA

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.

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, 2000 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
NAME
STREET ADDRESS
CITY-ST-ZIP
CEOP
MC GUIRE, THOMAS R
350 WOODVIEW AVE
MORGAN HILL CA 95037 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EVS
KNELL, SANDRA A
350 WOODVIEW AVE
MORGAN HILL CA 95037 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EV
WANNAMAKER, JEFFREY
350 WOODVIEW AVE
MORGAN HILL CA 95037 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EV
BERGER, DAVID A
350 WOODVIEW AVE
MORGAN CA 95037 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
CASTAGNOLA, DENNIS
350 WOODVIEW AVE
MORGAN HILL CA 95037 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ASD
FRYOMAN, BEN A
350 WOODVIEW AVE
MORGAN HILL CA 95037 ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)