

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000004145

1. Entity Name

NATIONAL SPECIALTY SERVICES, INC.

FILED

Apr 25, 2000 8:00 am
Secretary of State

04-25-2000 90095 003 ***150.00

Principal Place of Business

Mailing Address

5555 GLENDON COURT
DUBLIN OH 43016

5555 GLENDON COURT
DUBLIN OH 43016-3249

C0072793

2. Principal Place of Business

3. Mailing Address

7000 Cardinal Place

7000 Cardinal Place

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

City & State

Dublin, OH

Dublin, OH

Zip

Country

Zip

Country

43017 U.S.A.

43017 U.S.A.

4. FEI Number

31-1341167

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.

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	C WALTER, ROBERT D 5555 GLENDON COURT DUBLIN OH	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	7000 Cardinal Place Dublin, OH 43017	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KANE, JOHN C 5555 GLENDON COURT DUBLIN OH	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC/D Kane, John C. 7000 Cardinal Place Dublin, OH 43017	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DOLIN, LISA M 5555 GLENDON COURT DUBLIN OH	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Perez, Diamon M. 7000 Cardinal Place Dublin, OH 43017	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT WAGONER, STEPHANIE A 5555 GLENDON COURT DUBLIN OH	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Richard S. Miller 7000 Cardinal Place Dublin, OH 43017	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MARTIN, GLENN L 5555 GLENDON CT DUBLIN OH 43016	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	7000 Cardinal Place Dublin, OH 43017	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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 #

Glenn L. Martin V.P. Taxes 4/12/00 614-757-5000