

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 21, 2000 8:00 am**  
**Secretary of State**  
 04-21-2000 90096 018 \*\*\*158.75

DOCUMENT # **F990000000220**  
 i. Entity Name  
**SDH IV, Inc.**

Principal Place of Business Mailing Address

Principal Place of Business  
**9801 Washingtonian Blvd**  
 Suite, Apt. #, etc.

3. Mailing Address  
**P.O. Box 352**  
 Suite, Apt. #, etc.

City & State  
**Gaithersburg MD**  
 Zip **20878** Country **US**

City & State  
**Buffalo, NY**  
 Zip **14240-0352** Country **US**

4. FEI Number  
**52-2136389**  
 Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**Corporation Service Company**  
**1201 Hays Street**  
**Tallahassee, FL 32301-2525**

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, 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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: **Richard H. Allen** **Richard H. Allen** **4/10/00** **(716) 633-2222**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Day Daytime Phone #

CR2E034 (9/99)

SDH IV, Inc.

Attachment  
COO67827  
F99000000220

**OFFICERS:**

**President:** Michel Landel

**Vice Presidents:** Robert A. Stern  
Anthony F. Alibrio  
William W. Hamman  
Thomas M. Mulligan  
James A. Seaton  
John Bush

~~**Secretary:** Joan Rector McGlockton~~

**Asst Secretaries:** Richard H. Allen  
Business Address (10 Earhart Drive, Williamsville NY 14221)  
Leslie Jones  
Brenda P. Fuller  
Robert A. Stern  
David Hayes  
Thomas R. Morse  
Anastasia E. Sweeney  
Anthony Viola

**Treasurer:** Vacant

**Asst Treasurer:** Kevin Nolan

**DIRECTORS:**

Michel Landel

Robert A. Stern

John Bush

**Business Address for the Above**

**Named Officers and Directors:**

9801 Washingtonian Blvd  
Gaithersburg, MD 20878

**State of Incorporation**

Delaware

**Federal I.D. No.**

52-2136389