

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000000720

1. Entity Name  
PRICE PFISTER, INC.

Principal Place of Business

MAIL STOP NO TW285  
701 EAST JOPPA ROAD  
TOWSON MD 21286

Mailing Address

MAIL STOP NO TW285  
701 EAST JOPPA ROAD  
TOWSON MD 21286

2. Principal Place of Business

19701 DaVinci

Suite, Apt. #, etc.

3. Mailing Address

Mail Stop No TW 266

Suite, Apt. #, etc.

City & State

Lake Forest CA

City & State

Zip

92610

Country

US

Zip

Country

4. FEI Number 95-3844796

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

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.

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, 2001 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 P  
NAME IRELAND, LES ☒ Delete  
STREET ADDRESS 13500 PAXTON STREET  
CITY-ST-ZIP PACOIMA CA

TITLE President  
NAME Christopher T. Metz ☒ Change ☐ Addition  
STREET ADDRESS 19701 DaVinci  
CITY-ST-ZIP Lake Forest, CA 92610

TITLE V  
NAME BIAGIONI, LINDA H ☐ Delete  
STREET ADDRESS 701 E. JOPPA RD  
CITY-ST-ZIP TOWSON MD

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

TITLE VASD  
NAME FENTON, CHARLES E ☐ Delete  
STREET ADDRESS 701 E. JOPPA RD  
CITY-ST-ZIP TOWSON MD

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

TITLE VS  
NAME LUCAS, BARBARA B ☐ Delete  
STREET ADDRESS 701 E. JOPPA RD  
CITY-ST-ZIP TOWSON MD

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

TITLE VD  
NAME MANGAN, MICHAEL ☐ Delete  
STREET ADDRESS 701 E. JOPPA RD  
CITY-ST-ZIP TOWSON MD

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

TITLE T  
NAME ROTHLEITNER, MARK M ☐ Delete  
STREET ADDRESS 701 E. JOPPA RD  
CITY-ST-ZIP TOWSON MD

TITLE  
NAME ☐ Change ☐ Addition  
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: *Barbara B Lucas*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Barbara B Lucas

4/3/01

Date

410-716-2890

Daytime Phone #

CR2E034 (10/00)

FILED  
Apr 16, 2001 8:00 am  
Secretary of State  
04-16-2001 90017 031 \*\*\*150.00

529670



DO NOT WRITE IN THIS SPACE