

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 18, 2000 8:00 am
Secretary of State

09-18-2000 90001 036 ***550.00

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DO NOT WRITE IN THIS SPACE

DOCUMENT # F990000009666
 1. Entity Name
Sunbelt Holding, Inc. I ✓

Principal Place of Business Mailing Address

2. Principal Place of Business
One Tyco Park
 Suite, Apt. #, etc.
 City & State **Exeter NH**
 Zip **03833** Country **USA**

3. Mailing Address
Tyco International (US) Inc.
State Tax Dept. 8th Floor
One Town Center Rd.
P.O. Box 5035
Boca Raton, FL 33431-0835

4. FEI Number **52-2135029** Applied For ☐ Not Applicable ☐
 5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
 Signature, typed or printed name of registered agent and title if applicable.

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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	<input type="checkbox"/> Delete	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete	
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		President
STREET ADDRESS		Stephen McDonough
CITY-ST-ZIP		8 Amelia Drive
		Nantucket MA 02554
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		Scott Stevenson
STREET ADDRESS		Vice President/Asst. Treasurer
CITY-ST-ZIP		One Town Center Rd.
		Boca Raton, FL 44386
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		Secretary
STREET ADDRESS		M. Brian Moroz
CITY-ST-ZIP		One Tyco Park
		Exeter NH 03833
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		Director
STREET ADDRESS		L. Dennis Kozlowski
CITY-ST-ZIP		One Tyco Park
		Exeter, NH 03833
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		Director
STREET ADDRESS		Mark Swartz
CITY-ST-ZIP		One Tyco Park
		Exeter, NH 03833
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		Vice President
STREET ADDRESS		Jeffery D. Mattfolk
CITY-ST-ZIP		One Town Center Rd.
		Boca Raton FL 33486

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: **Scott Stevenson** Vice President/Asst. Treasurer **9/13/00** (561) 988-7823

CR2E034 (5/00)