

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F99000001841

FILED
Jan 06, 2003
Secretary of State

Entity Name: EMED CO. INC.

Current Principal Place of Business:

2491 WEHRLE DRIVE
WILLIAMSVILLE, NY 14221

New Principal Place of Business:

Current Mailing Address:

2491 WEHRLE DRIVE
WILLIAMSVILLE, NY 14221

New Mailing Address:

FEI Number: 16-0920413 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FAY, THOMAS F
Address: 2491 WEHRLE DRIVE
City-St-Zip: WILLIAMSVILLE, NY 14221

Title: V () Delete
Name: DOYLE, RONALD
Address: 2491 WEHRLE DRIVE
City-St-Zip: WILLIAMSVILLE, NY 14221

Title: V () Delete
Name: FLANAGAN, KEVIN
Address: 2491 WEHRLE DRIVE
City-St-Zip: WILLIAMSVILLE, NY 14221

Title: V () Delete
Name: SKINNER, JAMES P
Address: 2491 WEHRLE DRIVE
City-St-Zip: WILLIAMSVILLE, NY 14221

Title: VS () Delete
Name: MEEHAN, J. WILLIAM
Address: 2491 WEHRLE DRIVE
City-St-Zip: WILLIAMSVILLE, NY 14221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: J WILLIAM MEEHAN

VP

01/06/2003

Electronic Signature of Signing Officer or Director

_____ Date