

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000003374

1. Entity Name

SCA HYGIENE PRODUCTS, INC.

FILED
May 13, 2000 8:00 am
Secretary of State

05-13-2000 90046 031 ***150.00

C0089874



DO NOT WRITE IN THIS SPACE

Principal Place of Business
 500 BALDWIN TOWER
 EDDYSTONE PA 19022

Mailing Address
 500 BALDWIN TOWER
 EDDYSTONE PA 19022-1333

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

4. FEI Number **68-0283647**

Applied For
 Not Applicable

Zip Country Zip Country

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

UNITED CORPORATE SERVICES, INC.
 801 NORTHEAST 167TH ST, STE 300
 NORTH MIAMI BEACH FL 33162

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 **PD** ☐ Delete
 NAME **CLEMENT, JOHN S**
 STREET ADDRESS **500 BALDWIN TOWER**
 CITY-ST-ZIP **EDDYSTONE PA 19022**

TITLE **PRESIDENT/DIRECTOR** ☐ Change ☒ Addition
 NAME **GUNNAR JOHANSSON**
 STREET ADDRESS **500 BALDWIN TOWER**
 CITY-ST-ZIP **EDDYSTONE, PA. 19022**

TITLE **V** ☐ Delete
 NAME **HINCKLEY, THOMAS L**
 STREET ADDRESS **500 BALDWIN TOWER**
 CITY-ST-ZIP **EDDYSTONE PA 19022**

TITLE **VICE PRESIDENT/INCO/DIR** ☒ Change ☐ Addition
 NAME **THOMAS L HINCKLEY**
 STREET ADDRESS **500 BALDWIN TOWER**
 CITY-ST-ZIP **EDDYSTONE, PA. 19022**

TITLE **S** ☐ Delete
 NAME **PIECHOWSKI, RICHARD**
 STREET ADDRESS **500 BALDWIN TOWER**
 CITY-ST-ZIP **EDDYSTONE PA 19022**

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

TITLE **TD** ☐ Delete
 NAME **FISHER, STEVE**
 STREET ADDRESS **500 BALDWIN TOWER**
 CITY-ST-ZIP **EDDYSTONE PA 19022**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VICE PRESIDENT/DIRECTOR** ☒ Change ☐ Addition
 NAME **JOHN S CLEMENT**
 STREET ADDRESS **500 BALDWIN TOWER**
 CITY-ST-ZIP **EDDYSTONE, PA. 19022**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VICE PRESIDENT/ISSUE** ☐ Change ☒ Addition
 NAME **DAN FILIPPINI**
 STREET ADDRESS **500 BALDWIN TOWER**
 CITY-ST-ZIP **EDDYSTONE, PA. 19022**

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: R. SIGNATURE SECRETARY 4/20/00 610-499-3376
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)