

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 12, 2002 8:00 am
Secretary of State

02-12-2002 90094 031 ***150.00

DOCUMENT # F99000003869

1. Entity Name
LADD EXTERIOR WALL SYSTEMS, INC.

Principal Place of Business

Mailing Address

~~117 WAKETA DRIVE~~
~~ASHBORO NC 27203~~

~~117 WAKETA DRIVE~~
~~ASHBORO NC 27203~~

2. Principal Place of business

3. Mailing Address

3220 Corporate Dr.

3220 Corporate Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Wilmington, NC

City & State

Wilmington, NC

Zip

28405

Country

New Hanover

Zip

28405

Country

New Hanover



DO NOT WRITE IN THIS SPACE

4. FEI Number

56-1657815

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, 2002 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	PCT	<input type="checkbox"/> Delete
NAME	NELSON, LADD S	
STREET ADDRESS	1635 HIGHWAY 62	
CITY-ST-ZIP	JULIAN NC 27283	
TITLE	SVC	<input type="checkbox"/> Delete
NAME	NELSON, JEAN R	
STREET ADDRESS	1635 HIGHWAY 62	
CITY-ST-ZIP	JULIAN NC 27283	
TITLE	D	<input type="checkbox"/> Delete
NAME	WISCO, ERIC A CPA	
STREET ADDRESS	440 WEST MARKET STREET	
CITY-ST-ZIP	GREENSBORO NC 27410-2206	
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
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ladd S. Nelson	
STREET ADDRESS	7422 Sea Lilly Lane	
CITY-ST-ZIP	Wilmington, NC 28409	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jean R. Nelson	
STREET ADDRESS	7422 Sea Lilly Lane	
CITY-ST-ZIP	Wilmington, NC 28409	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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

SIGNATURE REQUIRED JEAN R. NELSON

Date

Daytime Phone #

1-16-02 (910) 794-4600

CR2E034 (9/01)