

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 22, 2001 8:00 am
Secretary of State

03-22-2001 90055 041 ***150.00

DOCUMENT # F99000006636

1. Entity Name

BISSELL INC.

Principal Place of Business

**2345 WALKER ROAD
 GRAND RAPIDS MI 49544**

Mailing Address

**2345 WALKER ROAD
 GRAND RAPIDS MI 49544**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

38-0352410

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

**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND RD.
 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 **CP** ☐ Delete
 NAME **BISSELL, JOHN M**
 STREET ADDRESS **2345 WALKER RD.**
 CITY-ST-ZIP **GRAND RAPIDS MI 49544**

TITLE **C** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **CP** ☐ Delete
 NAME **BISSELL, MARK J**
 STREET ADDRESS **2345 WALKER RD.**
 CITY-ST-ZIP **GRAND RAPIDS MI 49544**

TITLE **DP** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **S** ☐ Delete
 NAME **BRENNAN, WILLIAM J**
 STREET ADDRESS **2345 WALKER RD.**
 CITY-ST-ZIP **GRAND RAPIDS MI 49544**

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

TITLE **T** ☐ Delete
 NAME **CALDON, DANIEL T**
 STREET ADDRESS **2345 WALKER RD.**
 CITY-ST-ZIP **GRAND RAPIDS MI 49544**

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

TITLE **D** ☒ Delete
 NAME **BISSELL, MATTHEW R**
 STREET ADDRESS **2345 WALKER RD.**
 CITY-ST-ZIP **GRAND RAPIDS MI 49544**

TITLE **D** ☐ Change ☒ Addition
 NAME **Peter M. Sears**
 STREET ADDRESS **2345 Walker Avenue, NW**
 CITY-ST-ZIP **Grand Rapids, MI 49544**

TITLE **D** ☐ Delete
 NAME **BLOEM, HARRY J**
 STREET ADDRESS **2345 WALKER RD.**
 CITY-ST-ZIP **GRAND RAPIDS MI 49544**

TITLE ☐ Change ☐ 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.

Daniel T. Caldon,
 Treasurer

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-6-61

Date

616/791-7735

Daytime Phone #

CR2E034 (10/00)