

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 20, 2001 8:00 am
Secretary of State

06-20-2001 90006 017 ***150.00

DOCUMENT # G56816

1. Entity Name

FURON, INC.



Principal Place of Business
% RONALD H. JONES
442 FOURTH AVE.
INDIALANTIC, FL 32903

Mailing Address
% RONALD H. JONES
442 FOURTH AVE.
INDIALANTIC, FL 32903

A0074234

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2912684	Applied For Not Applicable
------------------------------------	-------------------------------

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
-----------------------------------------------------------	---------------------------------------

6. Name and Address of Current Registered Agent JONES, RONALD H. 442 4th AVE. INDIALANTIC, FL 32903	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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reconstituting.) 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 NAME STREET ADDRESS CITY-ST-ZIP	PD JONES, RONALD H. 442 4th AVE INDIALANTIC, FL 32903 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WEINBERG, JERRY 9409 SW 1st PLACE GAINESVILLE, FL 32607 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: **RONALD H. JONES** **6/16/01** **800 473 0855**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Digitized Phone #

CR2E034 (11/00)

Attachment
856816
A0014234

FURON, INC.
442 4th Avenue
Indialantic, FL 32903
800-473-0855

June 16, 2001

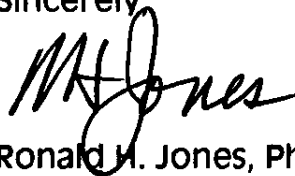
Florida Department of State
Division of Corporations
Uniform Business Report
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

This is the third year in a row that we had not received from your office our Uniform Business Report form. When I made a recent inquiry to your office, I was told to go to your website to get the form as well as any information regarding our Company, fill out this form with payment of \$150.00 and a letter explaining this circumstance. Accordingly, enclosed is the executed form, and a check (#3522) for \$150.00. Of interest, I noticed that the city address you have is Indianlantic which should be Indialantic. I wonder if this could be the reason we aren't receiving this form.

- Thank you for your attention to this matter. -

Sincerely,



Ronald M. Jones, Ph.D.
President

RHJ/jm
Enclosures