

# 2002 UNIFORM BUSINESS REPORT (UBR)

5/29

05-29-2002 90726 047 \*\*\*550.00  
J62641

DOCUMENT # J62641

1. Entity Name  
CLARIANT LIFE SCIENCE MOLECULES (FLORIDA) INC.

02 OCT 22 PM 2:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

4044 NE 54TH AVE  
GAINESVILLE FL 32609  
US

Mailing Address

P.O. BOX 1468  
GAINESVILLE FL 32602  
US

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 59-2806216

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 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<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | P<br>BRUMMITT, MICHAEL T<br>8517 SW 54 ROAD<br>GAINESVILLE FL 32608      | <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VP<br>STAFFORD, S C<br>13114 SILKTREE LANE WEST<br>JACKSONVILLE FL 32248 | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>MARBLE, CHARLES E<br>2816 PRUITT DR<br>COLUMBIA SC 29204            | <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VP<br>BAUCOM, KEITH<br>4044 NE 54TH RD<br>GAINESVILLE FL 32609           | <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VP<br>KRAMZAR, GARY R.<br>501 DELWORTH FARM LANE<br>WEST CHESTER PA      | <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | AS<br>REIGEL, ERNEST W.<br>100 NORTH TYRON ST., FLOOR 47<br>CHARLOTTE NC | <input checked="" type="checkbox"/> Delete |

|                                                |                                                               |                                                                              |
|------------------------------------------------|---------------------------------------------------------------|------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | P<br>Saachim, Mahler<br>Muhlenz Switzerland                   | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | Dissolution removed Image API<br>rejected in error.           | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VP<br>Helen; Miyasaki<br>4044 NE 54TH<br>Gainesville FL 32609 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VP<br>Ken Golder<br>monroe Rd<br>Charlotte NC                 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | Heiner, Meier<br>monroe Rd<br>Charlotte NC                    | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | Chris Barnard<br>monroe Rd<br>Charlotte NC                    | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |

CR2034 (9/01)

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: H. Miyasaki REQUIRED

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/4/02

Date

Daytime Phone

*Attachment*  
*Doc #*  
*562641 / 37598*

**Clariant Life Science Molecules  
2002 Uniform Business Report  
Address Corrections**

**June 20, 2002**

**Subject: FEIN – 59-2806216**

**P**

Joachim Mahler  
Röthausstrasse 61  
MuttENZ 1, CH 4132  
Switzerland

**VP**

Ken Golder  
4000 Monroe Rd.  
Charlotte, NC 28205

**T**

Heiner Meier  
4000 Monroe Rd.  
Charlotte, NC 28205

**S**

Chris Barnard  
4000 Monroe Rd.  
Charlotte, NC 28205