

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M70732

1. Entity Name

MELDISCO K-M BONITA SPRINGS, FL., INC. (3509)

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90382 019 ***150.00

Principal Place of Business

Mailing Address

3302 BONITA BCH. RD.
 BONITA SPGS. FL 33923
 US

933 MACARTHUR BLVD.
 MAHWAH NJ 07430-2045

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 22-2877319

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

UNITED STATES CORPORATION COMPANY
 110 NORTH MAGNOLIA STREET
 TALLAHASSEE FL 32301

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 | AT | <input checked="" type="checkbox"/> Delete |
| NAME | WOJNO, THOMAS | |
| STREET ADDRESS | 933 MACARTHUR BLVD. | |
| CITY-ST-ZIP | MAHWAH NJ | |
| TITLE | P | <input type="checkbox"/> Delete |
| NAME | SHEPARD, JEFFREY | |
| STREET ADDRESS | 933 MACARTHUR BLVD. | |
| CITY-ST-ZIP | MAHWAH NJ | |
| TITLE | V | <input type="checkbox"/> Delete |
| NAME | PROFFITT, RANDALL S | |
| STREET ADDRESS | 933 MACARTHUR BLVD. | |
| CITY-ST-ZIP | MAHWAH NJ | |
| TITLE | D | <input checked="" type="checkbox"/> Delete |
| NAME | PALIZZI, ANTHONY | |
| STREET ADDRESS | 3100 WEST BIG BEAVER | |
| CITY-ST-ZIP | TROY MI | |
| TITLE | AT | <input type="checkbox"/> Delete |
| NAME | BAUMLIN, THOMAS | |
| STREET ADDRESS | 933 MACARTHUR BLVD | |
| CITY-ST-ZIP | MAHWAH NJ 07430 | |
| TITLE | S | <input type="checkbox"/> Delete |
| NAME | RICHARDS, MAUREEN | |
| STREET ADDRESS | 933 MACARTHUR BLVD | |
| CITY-ST-ZIP | MAHWAH NJ | |

| | | |
|----------------|---------------------------------------|--|
| TITLE | | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | KATHLEEN GUINNESSEY | |
| STREET ADDRESS | 933 MacARTHUR BLVD., MAHWAH, NJ 07430 | |
| 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 | | |
| 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RANDALL S. PROFFITT APR 18 2000

Date

Daytime Phone #

(201) 934-2000