

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 05, 2002 8:00 am
Secretary of State

08-05-2002 90005 012 ***550.00



DO NOT WRITE IN THIS SPACE

DOCUMENT # P00000018263

1. Entity Name
SANFORD FEET, INC.

Principal Place of Business
**500 TOWNE CENTER CIR
 SANFORD FL 32771**

Mailing Address
**933 MACARTHUR BOULEVARD
 MAHWAH NJ 07430**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3627298**

Applied For
 Not Applicable

Zip Country Zip Country

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

**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (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 \$550.00
 After September 13, 2002 Fee will be \$750.00
 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	P	<input type="checkbox"/> Delete	TITLE	VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GORDON, JEFFREY A		NAME	Ronald Steese	
STREET ADDRESS	933 MACARTHUR BOULEVARD		STREET ADDRESS	67 MILLBROOK STREET, WORCESTER MASS 01606	
CITY-ST-ZIP	MAHWAH NJ 07430		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE	ASST. SECY.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GUINNESSY, KATHLEEN		NAME	Timothy Garahan	
STREET ADDRESS	933 MACARTHUR BOULEVARD		STREET ADDRESS	67 MILLBROOK STREET, WORCESTER MASS 01606	
CITY-ST-ZIP	MAHWAH NJ 07430		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICHARDS, MAUREEN		NAME		
STREET ADDRESS	933 MACARTHUR BOULEVARD		STREET ADDRESS		
CITY-ST-ZIP	MAHWAH NJ 07430		CITY-ST-ZIP		
TITLE	AS	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHILLING, ROBERT K		NAME		
STREET ADDRESS	933 MACARTHUR BOULEVARD		STREET ADDRESS		
CITY-ST-ZIP	MAHWAH NJ 07430		CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GUINNESSY, KATHLEEN		NAME		
STREET ADDRESS	933 MACARTHUR BOULEVARD		STREET ADDRESS		
CITY-ST-ZIP	MAHWAH NJ 07430		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHUBACK, MARC G		NAME		
STREET ADDRESS	933 MACARTHUR BOULEVARD		STREET ADDRESS		
CITY-ST-ZIP	MAHWAH NJ 07430		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: *Ronald Steese* **RONALD STEESE, V.P.** 07-19-02 (508) 757-5006

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (4/02)