

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 21, 2001 8:00 am  
Secretary of State

03-21-2001 90072 035 \*\*\*150.00

DOCUMENT # P00000087405

1. Entity Name

HI/HAWTHORNE, INC.

Principal Place of Business

C/O URDANG & ASSOCIATES  
630 WEST GERMANTOWN PIKE #321  
PLYMOUTH MEETING PA 19462

Mailing Address

C/O URDANG & ASSOCIATES  
630 WEST GERMANTOWN PIKE #321  
PLYMOUTH MEETING PA 19462

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

58-2572111

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

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 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

TITLE D ☐ Delete  
NAME E. SCOTT URDANG  
STREET ADDRESS C/O 630 WEST GERMANTOWN PIKE #321  
CITY-ST-ZIP PLYMOUTH MEETING PA 19462

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DPT ☒ Change ☐ Addition  
NAME E. Scott Urdang  
STREET ADDRESS (same - no change)  
CITY-ST-ZIP

TITLE C ☐ Change ☒ Addition  
NAME Richard J. Ferst  
STREET ADDRESS 630 W. Germantown Pike, Ste. 321  
CITY-ST-ZIP Plymouth Meeting, PA 19462

TITLE VS ☐ Change ☒ Addition  
NAME David J. Blum  
STREET ADDRESS 630 W. Germantown Pike, Ste. 321  
CITY-ST-ZIP Plymouth Meeting, PA 19462

TITLE V ☐ Change ☒ Addition  
NAME Steven Novick  
STREET ADDRESS (Same as above)  
CITY-ST-ZIP

TITLE V ☐ Change ☒ Addition  
NAME Vincent Sanfilippo  
STREET ADDRESS (same as above)  
CITY-ST-ZIP

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.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David J. Blum

Date

3-14-01

Daytime Phone #

610-818-4618

CR2E034 (10/00)