

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2002 8:00 am
Secretary of State

05-07-2002 90369 038 ***150.00

DOCUMENT # P01000023501

1. Entity Name
TECFRON, INC.

Principal Place of Business

**1 WESTGRILL PLACE
 PALM COAST FL 32164**

Mailing Address

**1 WESTGRILL PLACE
 PALM COAST FL 32164**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3688819

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**TIMOTHY M. GOAN, P.A.
 1 CORPORATE DR, SUITE 1-C
 PALM COAST FL 32137**

7. Name and Address of New Registered Agent

Name **Henry T. Leshner**

Street Address (P.O. Box Number is Not Acceptable)

1 Westgrill Place

City

Palm Coast

FL

Zip Code

32164

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

Henry T. Leshner Sr. **Henry T. Leshner, Sr.**

4-20-02

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

TITLE **D** ☐ Delete
 NAME **LESHER, HENRY T JR**
 STREET ADDRESS **1 WESTGRILL PLACE**
 CITY-ST-ZIP **PALM COAST FL 32164**

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 **Vice President** ☐ Change ☒ Addition
 NAME **Catherine L. Schmidt**
 STREET ADDRESS **196 Bartley Road**
 CITY-ST-ZIP **Long Valley, New Jersey 07853**

TITLE ☐ Change ☒ Addition
 NAME **Secretary Frederick C. Leshner**
 STREET ADDRESS **672 Massachusetts Ave #1007**
 CITY-ST-ZIP **Cambridge, MA 02139**

TITLE ☐ Change ☒ Addition
 NAME **Treasurer Aaron D. Leshner**
 STREET ADDRESS **241 Seamount Ct.**
 CITY-ST-ZIP **Ponte Verde Beach, FL 32082**

TITLE ☐ Change ☒ Addition
 NAME **President Henry T. Leshner, Jr**
 STREET ADDRESS **628 Sonoma Street**
 CITY-ST-ZIP **San Marcos, California 92078**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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:

Henry T. Leshner **4/20/02**

Date

Daytime Phone #

760-761-0160

CR2E034 (9/01)