

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 07, 2003 8:00 am**  
**Secretary of State**

04-07-2003 90958 003 \*\*\*150.00

0666316 AB

**DOCUMENT # P09832**

1. Entity Name  
**PILKINGTON NORTH AMERICA, INC.**



Principal Place of Business  
**811 MADISON AVENUE  
TOLEDO OH 43687-0799**

Mailing Address  
**811 MADISON AVE.  
P. O. BOX 799  
TOLEDO OH 43697-0799  
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 **34-1506654**

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

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>COB KNOWLTON, WARREN D 29709 SOMERSET PERRYSBURG OH 43551</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PBP KARCHER, R.W. 811 MADISON AVENUE TOLEDO OH 43697</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP CLARK, ANTHONY R 444 EAST FRONT ST PERRYSBURG OH 43551</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP ALTMAN, RICHARD A 2532 GUNN ROAD HOLLAND OH 43528</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP EHLE, JAMES A 8939 SANDRIDGE DR HOLLAND OH 43528</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP MCCREARY, WILLIAM N 7307 WHISPERING OAKS SYLVANIA OH 43560</b>	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>See attached Additions</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

*Attachment*  
**PILKINGTON NORTH AMERICA, INC.**

90076098  
# PD9832

**BOARD OF DIRECTORS**

**Class A Directors**

Andrew M. Robb  
Prescot Road  
St. Helens, Merseyside  
England WA10 3TT

R. W. Karcher  
811 Madison Avenue  
Toledo, Ohio 43697

**Class B Directors**

none

attachment  
**PILKINGTON NORTH AMERICA, INC.**

90076098  
# P09832

**UBR OFFICERS Additions**

<b><u>Name</u></b>	<b><u>Title</u></b>	<b><u>Business Address</u></b>
Randall D. Berg	Vice President	811 Madison Avenue Toledo, OH 43697
R. A. Frampton	Vice President	811 Madison Avenue Toledo, OH 43697
P. Zito	Vice President	811 Madison Avenue Toledo, OH 43697
David W. Hilton	Vice President	811 Madison Avenue Toledo, OH 43697
<del>D. N. Vermilya</del>	<del>Vice President</del>	<del>811 Madison Avenue Toledo, OH 43697</del>
Anthony R. Shaw	Vice President	811 Madison Avenue Toledo, OH 43697
Alan R. Graham	Vice-President General Counsel Secretary	811 Madison Avenue Toledo, OH 43697
Gerard M. Gray	Chief Financial Officer	811 Madison Avenue Toledo, OH 43697
Jeffrey T. Bowman	Treasurer/Controller	811 Madison Avenue Toledo, OH 43697
R. Pike	Assistant Secretary	811 Madison Avenue Toledo, OH 43697