

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P14092

1. Entity Name  
AVERY, INC.

**FILED**  
**Mar 27, 2002 8:00 am**  
**Secretary of State**

03-27-2002 90021 032 \*\*\*150.00

Principal Place of Business  
150 NO. ORANGE GROVE BLVD.  
PASADENA CA 91103

Mailing Address  
150 NO. ORANGE GROVE BLVD.  
PASADENA CA 91103



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip

3. Mailing Address  
150 N. Orange Grove  
Suite, Apt. #, etc.  
LAW DEPT  
City & State  
Pasadena, CA  
Zip  
91103

4. FEI Number  
95-3650928

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
UNITED STATES CORPORATION COMPANY  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

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, 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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VAN SCHOONENBERG, R.G.		NAME		
STREET ADDRESS	150 NO. ORANGE GROVE BLVD.		STREET ADDRESS		
CITY-ST-ZIP	PASADENA CA 91103		CITY-ST-ZIP		
TITLE	VTD	<input checked="" type="checkbox"/> Delete	TITLE	VP + Treasurer + Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SMITH, WAYNE H.		NAME	K.E. Rodriguez	
STREET ADDRESS	150 NO. ORANGE GROVE BLVD.		STREET ADDRESS	150 N. Orange Grove	
CITY-ST-ZIP	PASADENA CA 91103		CITY-ST-ZIP	Pasadena, CA 91103	
TITLE	VSD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RANDALL, RICHARD P.		NAME		
STREET ADDRESS	150 NO. ORANGE GROVE BLVD.		STREET ADDRESS		
CITY-ST-ZIP	PASADENA CA 91103		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: P. RANDALL 3/4/2002 626-304-2223  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)