

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P16534

1. Entity Name

THE OHIO BRASS COMPANY

FILED
Apr 18, 2000 8:00 am
Secretary of State

04-18-2000 90067 005 ***150.00

Principal Place of Business

Mailing Address

8711 WADSWORTH RD.
PO BOX 1001
WADSWORTH OH 44281-7902

210 N ALLEN ST
PO BOX 1001
CENTRALIA MO 65240-1302
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

06-1212962

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

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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 *Michael E. Estes*

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, 2000 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 ASV ☐ Delete
NAME DAVIES, R.W.
STREET ADDRESS 584 DERBY MILFORD ROAD
CITY-ST-ZIP ORANGE CT

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☒ Delete
NAME ANDREWS, S.J.
STREET ADDRESS 210 NORTH ALLEN ST
CITY-ST-ZIP CENTRALIA MO

TITLE VP & GEN. MANAGER ☒ Change ☐ Addition
NAME BROWN, W.M.
STREET ADDRESS 210 NORTH ALLEN ST.
CITY-ST-ZIP CENTRALIA MO 65240

TITLE PD ☐ Delete
NAME ROWELL, H.B.
STREET ADDRESS 584 DERBY MILFORD RD
CITY-ST-ZIP ORANGE CT 06477

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME BIGGART, J.H.
STREET ADDRESS 584 DERBY MILFORD RD
CITY-ST-ZIP ORANGE CT

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPO ☐ Delete
NAME STUMBAUGH, GARY A
STREET ADDRESS 210 NORTH ALLEN ST
CITY-ST-ZIP CENTRALIA MO

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Delete
NAME ESTES, MICHAEL
STREET ADDRESS 210 N ALLEN ST
CITY-ST-ZIP CENTRALIA MO 65240

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: *Michael E. Estes*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael E. ESTES

Date

4-11-00

(573) 682-2552

Daytime Phone #

CR2E034 (9/99)