

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90155 027 ***150.00

0687058

DOCUMENT # P16829

1. Entity Name

TRILECTRON INDUSTRIES, INC.

Principal Place of Business

11001 U.S. HWY 41 N.
 PALMETTO FL 34221
 US

Mailing Address

3600 WEST LAKE AVE.
 GLENVIEW IL 60025

765625



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **22-1911151**

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

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND RD.
 PLANTATION FL 33324**

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 reinstalling)

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	CD	<input checked="" type="checkbox"/> Delete
NAME	BORAX, SIGMUND	
STREET ADDRESS	11001 US HIGHWAY 41 A	
CITY-ST-ZIP	PALMETTO FL 34221	
TITLE	DV	<input checked="" type="checkbox"/> Delete
NAME	MENDELSON, VICTOR	
STREET ADDRESS	3000 TAFT STREET	
CITY-ST-ZIP	HOLLYWOOD FL 33021	
TITLE	PVD	<input type="checkbox"/> Delete
NAME	CALDWELL, JOY P	
STREET ADDRESS	11001 US HIGHWAY 41 N.	
CITY-ST-ZIP	PALMETTO FL 34221	
TITLE	DVC	<input type="checkbox"/> Delete
NAME	MENDELSON, LAURANS	
STREET ADDRESS	3000 TAFT STREET	
CITY-ST-ZIP	HOLLYWOOD FL 33021	
TITLE	TD	<input type="checkbox"/> Delete
NAME	IRWIN, THOMAS S	
STREET ADDRESS	3000 TAFT STREET	
CITY-ST-ZIP	HOLLYWOOD FL 33021	
TITLE	V	<input type="checkbox"/> Delete
NAME	MUSIAI, KURT	
STREET ADDRESS	11001 US HIGHWAY 41 N.	
CITY-ST-ZIP	PALMETTO FL 34221	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Dauncy, Daniel L	
STREET ADDRESS	3600 West Lake Ave	
CITY-ST-ZIP	Glenview IL 60025	
TITLE	VTD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RODRIGUEZ, FELIX L	
STREET ADDRESS	3600 WEST LAKE AVE	
CITY-ST-ZIP	GLENVIEW IL 60025	
TITLE	VSD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WOODEN, JAMES H	
STREET ADDRESS	3600 WEST LAKE AVE	
CITY-ST-ZIP	GLENVIEW IL 60025	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MCGRATH, ROBERT V	
STREET ADDRESS	3600 WEST LAKE AVE	
CITY-ST-ZIP	GLENVIEW IL 60025	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SULLIVAN, WILLIAM J	
STREET ADDRESS	3600 WEST LAKE AVE	
CITY-ST-ZIP	GLENVIEW IL 60025	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MARTIN, DENNIS J	
STREET ADDRESS	3600 WEST LAKE AVE	
CITY-ST-ZIP	GLENVIEW IL 60025	

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

04-30-2001

Date

847.724.2500

Daytime Phone #

CR2E034 (10/00)