## 2002 Uniform Business Report (UBR)

## Mar 14, 2002 8:00 am DOCUMENT # P17518 **Secretary of State** 1. Entity Name 03-14-2002 90029 043 \*\*\*150.00 SCANTRON CORPORATION Principal Place of Business Mailing Address 1361 VALENCIA AVENUE P.O. BOX 105250 TUSTIN CA 92680 ATLANTA GA 30348-5250 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State Applied For 4. FEI Number City & State 95-2767912 Not Applicable Country Žip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent ----6. Name and Address of Current Registered Agent. CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 City 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. CR2E034 (9/01) ☐ Change ☐ Addition TITLE □ Delete TITLE TUFF, TIMOTHY C NAME NAME STREET ADDRESS STREET ADDRESS 2939 MILLER ROAD CITY-ST-ZIP CITY-ST-ZIP **DECATUR GA 30035** Change ☐ Addition □ Delete TITLE TITLE ŊΡ NAME HOAG, THOMAS R STREET ADDRESS STREET ADDRESS 1361 VALENCIA AVENUE CITY-ST-7IP CITY-ST-ZIP TUSTIN CA:92680 DT The state of th TITLE" Delete Change -- Addition = -TITLE " NAME -NAME DOLLAR, WILLIAM M STREET ADDRESS STREET ADDRESS 2939 MILLER ROAD CITY-ST-ZIP CITY-ST-ZIP **DECATUR GA 30035** Change ☐ Addition Delete TIT! F TITLE NAME WALTERS, JOHN C NAME STREET ADDRESS STREET ADDRESS 2939 MILLER ROAD CITY-ST-ZIP CITY-ST-ZIP DECATUR GA 30035 ☐ Change ☐ Addition **⊠** Delete TITLE TITLE NAME NAME CROCKER, DERWOOD R STREET ADDRESS STREET ADDRESS 1361 VALENCIA AVENUE CITY-ST-ZIP CITY-ST-ZIP TUSTIN CA 92680 TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME MOORE, LAWRENCE STREET ADDRESS STREET ADDRESS 1361 VALENCIA AVENUE CITY-ST-ZIP **TUSTIN CA 92680**

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 employered 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

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