

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P26073

1. Entity Name

MAREMONT CORPORATION

FILED
Feb 16, 2000 8:00 am
Secretary of State

02-16-2000 90033 035 ***150.00

Principal Place of Business

1209 ORANGE STREET
WILMINGTON DE 19801
US

Mailing Address

ONE NOBLITT PLAZA
BOX 3000
COLUMBUS IN 47202-3000
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

13-2986138

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.

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, 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 PCD ☐ Delete
NAME POND, BYRON O.
STREET ADDRESS 5151 WOODBRIAR CT
CITY-ST-ZIP COLUMBUS IN 47201

TITLE PCD ☒ Change ☐ Addition
NAME Hunt, V. William
STREET ADDRESS 9622 West Shore Drive
CITY-ST-ZIP Columbus, Indiana 47201

TITLE VD ☐ Delete
NAME HUNT, V. WILLIAM
STREET ADDRESS 9622 W. SHORE DRIVE
CITY-ST-ZIP COLUMBUS IN 47201

TITLE ☒ Change ☐ Addition
NAME Mack, Raymond P.
STREET ADDRESS 750 Shoreline Drive
CITY-ST-ZIP Columbus, Indiana 47201

TITLE D ☐ Delete
NAME BAKER, JAMES K.
STREET ADDRESS 12044 W. SR 46
CITY-ST-ZIP COLUMBUS IN 47201

TITLE ☒ Change ☐ Addition
NAME Smith, Richard
STREET ADDRESS 4442 Mallard Point
CITY-ST-ZIP Columbus, Indiana 47201

TITLE T ☐ Delete
NAME SALES, A R
STREET ADDRESS 865 BAYWOOD COURT
CITY-ST-ZIP COLUMBUS IN 47201

TITLE ☒ Change ☐ Addition
NAME Kuzma, Gregory P.
STREET ADDRESS 2000 Charwood Drive
CITY-ST-ZIP Columbus, Indiana 47102

TITLE CTO ☐ Delete
NAME LOWE, WILLIAM M.
STREET ADDRESS 4843 TIMBER RIDGE
CITY-ST-ZIP COLUMBUS IN

TITLE VS ☐ Change ☒ Addition
NAME Gifford, Page E.
STREET ADDRESS 737 Lafayette Street
CITY-ST-ZIP Columbus, Indiana 47102

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

William M. Lowe
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William M. Lowe

Date

812-379-3523

Daytime Phone #

CR2E034 (9/99)