

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91866 018 ***150.00

DOCUMENT # P27044

1. Entity Name
EPICOR INDUSTRIES, INC.



Principal Place of Business
**900 SOUTH BROADWAY
DENVER CO 80209
US**

Mailing Address
**900 SOUTH BROADWAY
DENVER CO 80209
US**

2. Principal Place of Business
4801 Springfield Street

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Dayton, OH

City & State

4. FEI Number **36-3672434**

Applied For
Not Applicable

Zip Country
45431 US

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

**CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☒ Delete
NAME **WIGGINS, JAMES D**
STREET ADDRESS **900 S. BROADWAY**
CITY-ST-ZIP **DENVER CO 80209**

TITLE **Director/President** ☐ Change ☒ Addition
NAME **Ronald J. Cervelli**
STREET ADDRESS **900 S. Broadway**
CITY-ST-ZIP **Denver, CO 80209**

TITLE **DSVP** ☒ Delete
NAME **HARRIS, B.J.**
STREET ADDRESS **900 SOUTH BROADWAY**
CITY-ST-ZIP **DENVER CO 80209**

TITLE **Director/VP and Treasurer** ☐ Change ☒ Addition
NAME **Daniel J. Disser**
STREET ADDRESS **4801 Springfield St.**
CITY-ST-ZIP **Dayton, OH 45431**

TITLE **AT** ☐ Delete
NAME **SULLIVAN, KATHLEEN A**
STREET ADDRESS **900 S. BROADWAY**
CITY-ST-ZIP **DENVER CO 80209**

TITLE **Title - Assistant Secretary** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **AT** ☐ Delete
NAME **RUSK, DIANE M**
STREET ADDRESS **900 S BROADWAY**
CITY-ST-ZIP **DENVER CO 80209**

TITLE **Title - Assistant Secretary** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S** ☐ Delete
NAME **NELSON, JAMES E**
STREET ADDRESS **900 SOUTH BROADWAY**
CITY-ST-ZIP **DENVER CO 80209**

TITLE **Director** ☐ Change ☒ Addition
NAME **Anthony J. Reading**
STREET ADDRESS **4801 Springfield St.**
CITY-ST-ZIP **Dayton, OH 45431**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **Director/VP and Controller** ☐ Change ☒ Addition
NAME **Michael L. Weiss**
STREET ADDRESS **900 S. Broadway**
CITY-ST-ZIP **Denver, CO 80209**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **DIANE M. Rusk**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)