

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P34217 (0)

1. Entity Name
ALLTECH Operations Inc.

FILED

00 FEB 10 AM 11:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
465 Spring Park Place
Herndon, VA 20170

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip

3. Mailing Address
465 Spring Park Place
Suite, Apt. #, etc.
Kevin J. Curran
City & State
Herndon, VA
Zip
20170

DO NOT WRITE IN THIS SPACE

4. FEI Number
54-1499986
Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT Corporation System
1200 S. Pine Island Road
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 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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	S	Curran, K.J.	One Penn Plaza New York, NY 10119	<input type="checkbox"/> Delete
	D	McAlister, D.A.	301 North Charles Street Baltimore, MD 21201	<input type="checkbox"/> Delete
	T	Paone, B.N.	One Penn Plaza New York, NY 10119	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
P	Roman, W.S.	One Penn Plaza New York, NY 10119		<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
SVP	Coullahan, R	465 Spring Park Place Herndon, VA 20170		<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
C	Sheridan, P.G.	One Penn Plaza New York, NY 10119		<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition

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:  Kevin J. Curran, 02/02/00 (212) 465-5304
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)