2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # P37802** Feb 24, 2000 8:00 am **Secretary of State** EDWARDS AND KELCEY, INC. 02-24-2000 90012 050 ***150.00 Mailing Address Principal Place of Business 299 MADISON AVENUE 299 MADISON AVENUE P.O. BOX 1936 P.O. BOX 1936 MORRISTOWN NJ 07962 MORRISTOWN NJ 07962-1936 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 22-1623519 Not Applicable Zip Country 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 Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Addition CHAIRMAN Change Change PD TITLE □ Delete TITLE MCMAHON, KEVIN NAME NAME STREET ADDRESS STREET ADDRESS 299 MADISON AVE CITY-ST-ZIP CITY-ST-ZIP MORRISTOWN NJ 07962 PRESIDENT ☐ Addition Change TITLE TITLE Defete 299 MADISON AVE REFINSKI, ELIZABETH NAME NAME STREET ADDRESS YORKISTOWN, N.J. 07962 STREET ADDRESS 299 MADISON AVE CITY-ST-ZIP CITY-ST-7IP MORRISTOWN NJ 07962 ☐ Change ☐ Addition TITLE Delete TITLE BARRY, THOMAS E NAME NAME STREET ADDRESS STREET ADDRESS 299 MADISON AVE CITY-ST-ZIP CITY-ST-ZIP MORRISTOWN NJ 07962 ☐ Change ☐ Addition 🔀 Delete TITLE WISS, RONALD NAME STREET ADDRESS STREET ADDRESS 299 MADISON AVE CITY-ST-ZIP CITY-ST-ZIP MORRISTOWN NJ 07962 ☐ Addition ☐ Change ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITLE TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.