

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000028731

1. Entity Name

BAYCHEM, INC. OF FLORIDA

FILED
Apr 24, 2000 8:00 am
Secretary of State

04-24-2000 90004 019 ***150.00

Principal Place of Business

~~3715 N FRONTAGE ROAD~~ ✓

~~SUITE 2800~~

~~LAKELAND FL 33810~~

US

Mailing Address

101 E. KENNEDY BLVD.

SUITE 2800

TAMPA FL 33602-5150

2. Principal Place of Business

3520 Adamo Drive

3. Mailing Address

101 E. Kennedy Blvd.

Suite, Apt. #, etc.

Suite 2700

City & State

Tampa FL

Zip

33602

Country

USA

City & State

Tampa FL

Zip

33602

Country

USA

City & State

Tampa FL

Zip

33602

Country

USA

City & State

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33602

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

58-2147966

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

MULLIS, HAROLD W JR.
101 EAST KENNEDY BLVD.
SUITE 2800
TAMPA FL 33602

Name

Street Address (P.O. Box Number is Not Acceptable)

101 E. Kennedy Blvd.

Suite 2700

City

Tampa

FL

Zip Code

33602

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)

NO

✓

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 P
NAME HOL, G.W.F.
STREET ADDRESS 3715 N FRONTAGE ROAD ✓
CITY-ST-ZIP LAKELAND FL 33810

TITLE
NAME
STREET ADDRESS 3520 Adamo Drive
CITY-ST-ZIP Tampa, FL 33605

TITLE VP
NAME RODGER, GILBERT
STREET ADDRESS 3715 N FRONTAGE ROAD ✓
CITY-ST-ZIP LAKELAND FL 33810

TITLE
NAME
STREET ADDRESS 3520 Adamo Drive
CITY-ST-ZIP Tampa, FL 33605

TITLE S
NAME NADIN, M.D.
STREET ADDRESS 3715 N FRONTAGE ROAD ✓
CITY-ST-ZIP LAKELAND FL 33810

TITLE
NAME
STREET ADDRESS 3520 Adamo Drive
CITY-ST-ZIP Tampa, FL 33605

TITLE AS
NAME WORRELL, S.W.
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS 3520 Adamo Drive
CITY-ST-ZIP Tampa, FL 33605

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
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: *Steven W. Worrell*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/00

336-851-6813

Date

Daytime Phone #

CR2E034 (9/99)