## 2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered. RICHARD W. DYER

SIGNATURE AND TYPED OR PRINTED N

SIGNATURE: 641

## FILED Feb 07, 2001 8:00 am Secretary of State DOCUMENT # **P94000025995** 1. Entity Name ACCIPITER II. INC. 02-07-2001 90200 028 \*\*\*158.75 Principal Place of Business Mailing Address 791 WYE RD 791 WYF RA AKRON OH 44333 AKRON OH 44333 口のなりませつ 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0483114 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND RD. PLANTATION FL 33324 Zip Code FL 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, 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 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. DP TITLE ☐ Delete TITLE Change ☐ Addition MEYERSON, ROBERT F NAME MEYERSON, ROBERT F NAME STREET ADDRESS **791 WYE RD** STREET ADDRESS 791 WYE RO CITY-ST-7IP CITY-ST-ZIP **AKRON OH 44333** AKRON, OH TITLE DVP ☐ Delete TITLE D. EVP. 5 ☐ Addition Change MURPHY, ELIZABETH NAME NAME MURPHY ELIZABETH S. STREET ADDRESS 791 WYE ROAD STREET ADDRESS 191 WYE RO CITY-ST-ZIP CITY-ST-ZIP AKRON OH AKRONIOH DVPS ---TITLE ---· Delete TITLE Change Addition\_ MEYERSON, ADAM H NAME NAME STREET ADDRESS **791 WYE RD** STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP akron oh TITLE Delete TITLE PICEO, T.D Change Change ☐ Addition NAME DYER, RICHARD W NAME DYER RICHARD W. STREET ADDRESS STREET ADDRESS 791 WYE ROAD 791 WYE RD CITY-ST-ZIP AKRON OH 44333 CITY-ST-7IP AKRON OH 44333 TITLE ☐ Delete TITLE ☐ Change Addition EUP. ASST S NAME NAME MEYERSON, DAVID W. STREET ADDRESS STREET ADDRESS 791 WYE RD CITY-ST-ZIP CITY-ST-ZIP AKRON, OH 44333 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME 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

PRESIDENT

ME OF SIGNING OFFICER OR DIRECTO