

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000055655

1. Entity Name

EMPIRE MANAGEMENT COMPANY

FILED
May 14, 2001 8:00 am
Secretary of State

05-14-2001 90221 045 ***150.00

Principal Place of Business

223 WILMINGTON WEST CHESTER PIKE
CHADDS FORD PA 19317

Mailing Address

215 NORTH EOLA DRIVE
ORLANDO FL 32801

UUU50655

2. Principal Place of Business

364 Wilmington West Chester Pike

3. Mailing Address

364 WILMINGTON WEST CHESTER PIKE

Suite, Apt. #, etc.

Building C UNIT 6

Suite, Apt. #, etc.

City & State

Glen Mills PA

City & State

Zip

Country

19342

Delaware

Zip

Country

4. FEI Number 58-2338761

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

BALLETTA, JAMES ESQ
215 N EOLA DR
ORLANDO FL 32901-4

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, 2001 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 D
NAME SPANO, THOMAS V
STREET ADDRESS 223 WILMINGTON WEST CHESTER PIKE
CITY-ST-ZIP CHADDS FORD PA 19317 ☐ Delete

TITLE PST
NAME PHILLIPS, FRANKX
STREET ADDRESS 223 WILMINGTON WEST CHESTER PIKE
CITY-ST-ZIP CHADDS FORD PA 19317 ☐ Delete

TITLE VP
NAME HARVEY, JOSEPH
STREET ADDRESS 5294 N. ORANGE BLOSSOM TRAIL
CITY-ST-ZIP ORLANDO FL 32810 ☒ Delete

TITLE VP
NAME BELLETTA, JAMES
STREET ADDRESS 215 N. EOLA DR
CITY-ST-ZIP ORLANDO FL 32801 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 364 Wilmington West Chester Pike
CITY-ST-ZIP Glen Mills PA 19342 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 364 WILMINGTON WEST CHESTER PIKE
CITY-ST-ZIP Glen Mills PA 19342 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP
NAME BALLETTA, JAMES
STREET ADDRESS 215 N EOLA DR
CITY-ST-ZIP ORLANDO, FL 32801 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
FRANK X. PHILLIPS, PRESIDENT

4/26/01

Date

Daytime Phone #

0061388

CR2E034 (10/00)