

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90458 018 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000044046

1. Entity Name
NEW CDH, INC.

Principal Place of Business
22942 CAPTAIN KIDD LANE
CUDJOE KEY FL 33042

Mailing Address
22942 CAPTAIN KIDD LANE
CUDJOE KEY FL 33042



2. Principal Place of Business
164 CANAL STREET

3. Mailing Address
(SAME)

Suite, Apt. #, etc.
SUITE 400

Suite, Apt. #, etc.

City & State
BOSTON, MA

City & State

Zip
02114

Country

Zip

Country

4. FEI Number 06-1516191

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

LANGER, ALEXANDER G
22942 CAPTAIN KIDD LANE
CUDJOE KEY FL 33042

7. Name and Address of New Registered Agent

Name HELEN G. LENZA

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

225 FLAMINGO BLVD.

City PORT CHARLOTTE

FL

Zip Code 33954

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 HELEN G. LENZA ✓ HL
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when reinstating)

DATE 7/20/02

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, 2002 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
DPS
LANGER, ALEXANDER G
22942 CAPTAIN KIDD LANE
CUDJOE KEY FL 33042 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DT
TUCK, KELLY L
214 MAIN STREET #340
EL SEGUNDO CA 90245 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ROTH, LAURIE J
3547 HIGHWAY 155
COULEE DAM WA 99116 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ 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
CITY-ST-ZIP
DPS
LANGER, ALEXANDER G.
94 ST. ROSE STREET
JAMAICA PLAIN, MA 02130 ☒ Change ☐ Addition

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ 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 602, 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: ALEXANDER G. LANGER ✓ AL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/29/02 522-4889

CR2E034 (9/01)