FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1007



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

| DOCU | MENT | # |
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803618

(8)

SCHULLER INTERNATIONAL, Inc.

Principal Place of Business

Mailing Address

FILED May 07 1997 8:00am Secretary of State



| 717 | 17th. Street | 717 17th. | Street | 3 | | | | |
|-------------------------------|------------------------------------------------------------------|----------------------------------|------------------------|----------------------|---------------------------------------------------------------------------------------|---------------------------------|----------------------|------------|
| P.0 | . Box 17086 | P.O. Box | 17086 | | | | | |
| Denver, Colorado 80217 | | Denver, Colorado 80217 | | | | Date of Last Report 05/01/96 | | |
| 2. Principal | I Place of Business | 2a, Mailing Address | | | 4, FEI Number | | App | lied For |
| 21 | | 26 | | | 13-0889690 | | Not | Applicable |
| | ot. #, etc | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | □ \$ | 8.75 Ac Fee Req | |
| City & Si | late | City & State | ····· | | 6. Election Campaign Financing Trust Fund Contribution | | \$5.00 k Added to | |
| Zipi | Country | Zip | Countr | у | 8. This corporation has liability for i | ntangible tax | | 199.032, |
| 24 | 25 9. Name and Address of Currer | 29 29 Agent | [30] | | 10. Name and Address of New Re | | | |
| 110 | PRENTICE-HALL CORPOR N. MAGNOLIA STREET LAHASSEE, FL 32301 | RATION SYSTEM, I | NC . 82 | Street Addr | ess (P.O. Box Number is Not Acceptab | le) | | |
| | • | | 84 | City | | FL 8 | 5 Zip C | ode |
| office c agent SIGNATUR | I am fain≙iar with, and accept the oblig c | lations of, Section 607.0595, in | ionga Statute | :5. | oration submits this statement for the p lion's board of directors. I hereby accep | | ment as r | əgistered |
| | Signature, typica or printed name of registered ag | | | ent signature requir | red when reinstating) ADDITIONS/CHANGES TO OFFICE | DATE | DECTORS | 161.10 |
| 12. | OFFICERS AN | ID DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFIC | | Change | Addition |
| TITLE | S | DELETE | 1 1 TITLE | l l | | | Undings | |
| NAME | VON WALD, R.B. | | 1.2 NAME | | | | | |
| STREET ADDRES | 8 717 17th. Street | | | T ADDRESS | | | | |
| CHY ST 7F | Denver, Colorado 80 | DELETE | 1.4 CITY- | | | | Change | Addition |
| THE | T | [] Detert | 2.1 TITLE | | | ليحا | Ontarigo | |
| NAME | BULLOCK, W.S. | | 2.2 NAME | | | | | |
| STHELL ACHDRES | /11/ 1/th. Street | | | ET ADORESS | | | | |
| CL Y-S1-ZP | <u> Denver, Colorado 80</u> | DELETE | 2. 4 CITY 3.1 TITLE | | | | Change | Additio |
| Dit (F | CODE D C | E3 biccit | 3.2 NAME | t | | | | |
| MAM <u>E</u> | COPE, D.S. | | | ľ | | | | |
| STREET ADDRES | | 222 | | ET ADDRESS | | | | |
| COTY ST ZIP | Denver, Colorado 80 | JZUZ DELETE | 3.4. CITY 4.1 TITLE | | | | Change | Addition |
| TODE NAME | Р | the version | 4.2 NAM | | | | - | |
| | HENRY, C.L. | | | ET ADDRESS | | | | |
| STREET ADDRE | 12. 2.000 | 200 | 4.4 CITY | | | 1 | | |
| C-Fr-S1 ZiP TELE | Denver, Colorado 80 | DELETE | 5.1 TITLE | | | | Change | Aldition |
| NAME | VP | homet - A-C A / B | 5.2 NAME | | | 1/1 | -/n | 1/2 |
| STRUET ADDRES | JENSEN, K.L. | | | ET ADDRESS | | U 17. |)/ <i>'</i> -/ | 191 |
| | /1/ 1/th. Street | | 5.5 G TTY | | , | タノフ | / // | 1-1 |
| CHTY-ST ZIP | Denver, Colorado 80 | DELETE | 6.1 TITLE | | | | Change | Additio |
| NAME | | | 62 NAMI | | 00000218 | 1086° | 0 | |
| | er | | | ET ADDRESS | 00000218 -05/16/97010 | 19019 | | |
| SUPPLET ADDRES | 50 | | 64 CiTY | 1 | ***165.00 | | | |
| CHY-SI ZIF | I formation a make | ad with this filing does not aus | | | d in Section 119 07/3Vi). Florida Statute | s Hurther or | artify that t | he |

I do necessy certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statules. I further certify that the information and cated on this annual report or supplemental annual 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 Brock 12 or Block 13 if changed, or on an attachment with an address.

KING OFFICER OR DIRECTOR

David S. Cope, Vice President

4/29/97 Daytime Prione #