2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) 823312

DOCUMENT#

. Entity Name MCCORMICK DISTILLING COMP		
rincipal Place of Business ONE MCCORMICK LANE	Mailing Address ONE MCCORMICK LANE	
MECTON NO CAROL DECA	WEGTON NO 04000 OF FO	•

FILED Apr 22, 2003 8:00 am Secretary of State

04-22-2003 90077 040 ***158.75

Principal Plac ONE MCCORI WESTON MO	MICK LANE	3	ONE	g Address MCCORMICK LANE FON MO 64098-9558	<u> </u>							10
Principal Place of Business Address Address								11610 1101 01611 <u>1</u>	41811 B1811 B1811 T			
Suite, Apt. #, etc.			Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES					
City & State			City & State			4.	FEI Number	43-162498	5		oplied For ot Applicable	
Zip		Country	Zip		Country		5.	Certificate of	Status Desired	X	\$8.75 Add Fee Require	
	Name and Address of Current Registered Agent						7.	Name and A	ddress of New	Registered	Agent	
MERINOFF, SPENCER 3700 COMMERCE PARKWAY MIRAMAR FL 33025						Name Street Address (P.O. Box Number is Not Acceptable)						
					Ci	ty	<u> </u>			FL	Zip Cod	e
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. I am familiar with, and accept the obligations of registered agent.												
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE												
	Ir F″ÑÓŴÜ	FEE IS \$150.00			<u> </u>					<u></u> -		
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State									ion Campaign F Fund Contributi		\$ 5.0 □ Added	May Be to Fees
10.		OFFICERS AND I	DIRECTO	RS	11.		Al	_I DDITIONS/CH	HANGES TO OF	FICERS AND	DIRECTORS	S IN 11
TITLE 25, NAME STREET ADDRESS CITY-ST-ZIP	PCOO ZARGO, J 3805 N.W KANSAS (☐ Delete	TITLE NAME STREET ADO CITY-ST-ZI		Christi 11301	W- 13	FERNANI BHL ST. PANK		66221	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	16339 290	MICHEAL S OTH RD- N KS 66002		☐ Delete	TITLE NAME STREET ADD CITY-ST-Z		Cortrol Michae 13624	llen Friz Sw. 1	zell.	.6621	☐ Changé	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		NNETTE RKVIEW ST I KS 66002		Delete	TITLE NAME STREET ADD CITY-ST-ZI		M. Or	Anne to Nu te Ci	# 134+ ty mo	640.	Change 79	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		EDWARD A DMIER CIR. X 75252		Delete	TITLE NAME STREET ADD CITY-ST-ZI						☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		I, MICHAEL S BRIAR WAY X 75034		☐ Delete	TITLE NAME STREET ADD CITY-ST-ZI						Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	924 N BR/	, RICHARD G AINARD N HEIGHTS IL 60528		☐ Delete	NAME STREET ADD						☐ Change	Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: