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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 828622 1. Corporation Name

Principal Place of Business Mailing Address Mailing Address ATIN-TAX DEPT ONE UNIVAC LANE	ADVO, II	NC.					
AND INC. AND CONTROL LINEAR CARE WINDSOR CT 08095 US US 3. Date incorporated or Qualified 09/05/1972 2. Principal Place of Business 2. Amiling Address 2. Amiling Address 2. Amiling Address 2. Amiling Address 3. Date incorporated or Qualified 09/05/1972 3. Date incorporated or Qualified	Principal Place	e of Business	Mailing Address			i Bibit dibit bibit bibit bibit bibit bibit	
US 3. Date Incorporated or Quartied	ONE UNIVAC LANE ADV		ADVO INC ONE UNIVAC LANE		DO NOT WRITE IN	DO NOT WRITE IN THIS SPACE	
2. Principal Place of Business 2a. Mailing Address 06-0885252 Not Applied For Not Appl					3. Date Incorporated or Qualifed		
28	-						
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. S. Certificate of Status Desired \$8.75 Additional Fee Required Sc. Certificate of Status Desired \$8.875 Additional Fee Required Sc. Certificate of Status Desired \$8.75 Additional Fee Required Sc. Certificate of Status Desired \$8.75 Additional Fee Required Sc. Certificate of Status Desired Sc. Certificate of Status Desired \$5.00 May Be Additional Status Desired Sc. Certificate of Status Desired Sc. Certificate Sc. Certificate of Status Desired Sc. Certificate of Status Desired Sc. Certificate of Status Desired Sc. Certificate Sc. Ce	2. Principal P	lace of Business	2a. Mailing Address		_ = = = = = = = = = = = = = = = = = = =		
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City & State 23					5. Certifcate of Status Desired		
Zip							
Zip	_ '		h '		1		
24		Country		Country			
9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION FI. 33324 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. In familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. In familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE System, typed or printed raise of registered agent and size of applications of, Section 607.0505, Florida Statutes. SIGNATURE System, typed or printed raise of registered agent and size of applications of, Section 607.0505, Florida Statutes. SIGNATURE System, typed or printed raise of registered agent and size of applications of, Section 607.0505, Florida Statutes. SIGNATURE System, typed or printed raise of registered agent and size of application. SIGNATURE System, typed or printed raise of registered agent and size of application. SIGNATURE System, typed or printed raise of registered agent and size of application. SIGNATURE System, typed or printed raise of registered agent agent and size of application. In the System, typed or printed raise of registered agent agent and size of application. SIGNATURE SYSTEM ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. ITITLE WINDSOR CT WINDSOR CT TITLE VP STREET ADDRESS ONE UNIVAC LANE WINDSOR CT TITLE VS ONE UNIVAC LANE STREET ADDRESS ONE UNIVAC	<u> </u>				• • • • • • • • • • • • • • • • • • •		
C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION FL 33324 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent and state of profice of corporation's board of directors. I hereby accept the appointment as registered agent, and an accept the obligations of, Section 607.0505, Florids Statutes. SIGNATURE Signature, prior or printed rates of engineered agent and star applicable. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE EVPC. DELETE 13. TITLE VP ABRAHAH, JULIE Change Addition WINDSOR CT TITLE VS STREET ADDRESS ONE UNIVAC LANE WINDSOR CT TITLE VS STOLEER, DAVID M. STREET ADDRESS ONE UNIVAC LANE WINDSOR CT TITLE VF MAME STREET ADDRESS ONE UNIVAC LANE WINDSOR CT TITLE VF ABRAHAH, JULIE Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 LACTY-ST-ZP WINDSOR CT TITLE VF ABRAHAH, JULIE Change Addition Addition MULLOY, GARY M. STREET ADDRESS ONE UNIVAC LANE WINDSOR CT TITLE VF ABRAHAH, JULIE Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS ADDITIO	E21			1,,	10. Name and Address of New Regis	tered Agent	
1200 S. PINE ISLAND RD. PLANTATION FL 33324 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of. Section 607 0505, Florida Statutes. SIGNATURE Signature, Typed or printed name of registered agent and tile if applicable. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TIME EVPC. MICCOMBS, DON 11 STREET ADDRESS ONE UNINAC LANE WINDSOR CT TIME VP MARE HIRST, ROBERT S. STREET ADDRESS ONE UNINAC LANE WINDSOR CT TIME VS MINDSOR CT TIME MINDSOR CT				81 Name			
Section Sect				82 Street A	Address (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required whan reinstation) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ITTLE EVPC. DELETE 1:1 TITLE				83			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE VP MACCOMBS, DON 12. MAE 13. TITLE MCCOMBS, DON 12. MAE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ITTLE VP MAME MCCOMBS, DON 12. MAE 13. TREET ADDRESS ONE UNIVAC LANE 13. TREET ADDRESS ONE UNIVAC LANE 13. TREET ADDRESS ONE UNIVAC LANE 23. STREET ADDRESS ONE UNIVAC LANE 32. NAME 32. NAME 33. STREET ADDRESS ONE UNIVAC LANE WINDSOR CT TITLE VF NAME STREET ADDRESS ONE UNIVAC LANE 33. STREET ADDRESS ONE UNIVAC LANE WINDSOR CT 14. TITLE VT NAME TARALLO, SEBASTIAN ONE UNIVAC LANE 43. STREET ADDRESS ONE UNIVAC LANE WINDSOR CT TITLE VT NAME TARALLO, SEBASTIAN ONE UNIVAC LANE 43. STREET ADDRESS ONE UNIVAC LANE WINDSOR CT TITLE PCOO NAME ACTIVST-ZIP STREET ADDRESS ONE UNIVAC LANE WINDSOR CT TITLE PCOO NAME ACTIVST-ZIP STREET ADDRESS ONE UNIVAC LANE 33. STREET ADDRESS WINDSOR CT TITLE PCOO NAME 34. CITYST-ZIP STREET ADDRESS ONE UNIVAC LANE 35. STREET ADDRESS WINDSOR CT TITLE PCOO NAME 35. STREET ADDRESS STREET ADDRESS ACTIVST-ZIP STREET ADDRESS				84 City		FI 85 Zip Code	
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14. 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 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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY+ST-ZIP

SIGNATURE REQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR