2004 FOR PROFIT CORPORATION

Jan 20, 2004 8:00 am **Secretary of State ANNUAL REPORT DOCUMENT # F96000000956** 01-20-2004 90039 030 ***150.00 1. Entity Name TRICOR DIRECT, INC. Principal Place of Business Mailing Address LAVVVVEL 20 THOMPSON RD 6555 W GOOD HOPE RD BRANFORD, CT 06405 MILWAUKEE, WI 53233 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01092004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 52-1234223 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent **CT CORPORATION SYSTEM** 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION, FL 33324 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. 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 الم كالمال و 9.. Election Campaign Financing . **4 - \$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. DCV TITLE Delete TITLE Addition Change HUDSON, KATHERINE M NAME NAME STREET ADDRESS 6555 W GOOD HOPE RD STREET ADDRESS CITY-ST-ZIP MILWAUKEE, WI 53233 CITY-ST-ZIP PCEO TITLE ☐ Delete TITLE Change ☐ Addition JAEHNERT, FRANK NAME NAME STREET ADDRESS 6555 W GOOD HOPE RD STREET ADDRESS CiTY-ST-ZIP MILWAUKEE, WI CITY-ST-ZIP ☐ Delete TITLE TITLE Change Addition GOODKIND, CONRAD G ESQ. NAME NAME STREET ADDRESS 411 E WISCONSIN AVE STREET ADDRESS CITY-ST-ZIP MILWAUKEE, WI 53202 CITY-ST-ZIP TITLE SVPC Delete lice President : CFO TITLE Change Addition David Mathieson SCHROEDER, DAVID W NAME NAME wsss w.Good HepeRd. 6555 W GOOD HOPE RD STREET ADDRESS STREET ADDRESS Milwaukee, WI 53223 CITY-ST-ZIP MILWAUKEE, WI 53223 CITY-ST-7IP Benior UP . Treasurer TITLE ☐ Delete TITLE Change **□** Addition Donald & Rearic NAME NAME 6555 W. Good Hepe Rd. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP milwaukec TITLE Delete TITLE ☐ Change ☐ Addition

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12. I hereby certify that the information supplied with this filling 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.

NAME

STREET ADDRESS

CITY-ST-7IP

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE: 01.11.9001