


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90728 046 ***150.00

DOCUMENT # F97000005156					
1. Entity Name TRICO PRODUCTS CORPORATION OF TENNESSEE, INC.					
Principal Place of Business 8100 TRIDON DR. SMYRNA, TN 37167			Mailing Address CORPORATE TAX DEPT 900 S BROADWAY DENVER, CO 80217-5887		
2. Principal Place of Business		3. Mailing Address 1551 Wewatta St.			
Suite, Apt. #, etc.		Suite, Apt. #, etc. Mail Code 90-A4			
City & State		City & State Denver, CO		4. FEI Number 62-1051193	
Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country		
80202	US				
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CT CORPORATION SYSTEM 1200 S PINE ISLAND ROAD PLANTATION, FL 33324			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL	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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating). DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '11		
TITLE	DP	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CERVELLI, RONALD J		NAME	3200 Parker Dr.	
STREET ADDRESS	900 SO. BROADWAY		STREET ADDRESS	St. Augustine, FL 32084	
CITY-ST-ZIP	DENVER, CO 80209		CITY-ST-ZIP		
TITLE	VPT	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DISSER, DANIEL J		NAME		
STREET ADDRESS	4801 SPRINGFIELD ST.		STREET ADDRESS		
CITY-ST-ZIP	DAYTON, OH 45431		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KIRCHHOFF, GREGORY F		NAME		
STREET ADDRESS	4801 SPRINGFIELD ST.		STREET ADDRESS		
CITY-ST-ZIP	DAYTON, OH 45431		CITY-ST-ZIP		
TITLE	AS	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	NELSON, JAMES E		NAME	D David Carroll	
STREET ADDRESS	900 S. BROADWAY		STREET ADDRESS	100 King St. W. 6600 1 1st Canadian Pl.	
CITY-ST-ZIP	DENVER, CO 80209		CITY-ST-ZIP	Toronto, ON M5X 1B8	
TITLE	S	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PAPPAYLIOU, GEORGE S		NAME		
STREET ADDRESS	4801 SPRINGFIELD ST.		STREET ADDRESS		
CITY-ST-ZIP	DAYTON, OH 45431		CITY-ST-ZIP		
TITLE	ASTC	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	RUSK, DIANE M		NAME	1551 Wewatta St.	
STREET ADDRESS	900 S. BROADWAY		STREET ADDRESS	Denver, CO 80202	
CITY-ST-ZIP	DENVER, CO 80209		CITY-ST-ZIP		
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: <i>DIANE M Rusk</i>		DIANE M Rusk		4-13-04 303 744-5123	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	