

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2000 8:00 am
Secretary of State

02-19-2000 90005 028 ***150.00

DOCUMENT # P02215

1. Entity Name
UNITED STATIONERS SUPPLY CO.

Principal Place of Business 2200 E. GOLF ROAD PLAINES IL 60016-0267	Mailing Address 2200 E. GOLF ROAD DES PLAINES IL 60016-1246
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 36-2431718	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
PLANTATION FL 33324

7. Name and Address of New Registered Agent
 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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)
FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State
 10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME SV MALONEY, MEYER S 2200 E. GOLF RD. DES PLAINES IL 60016	<input type="checkbox"/> Delete
TITLE NAME PD LARRIMORE, RANDALL W 2200 E GOLF RD DES PLAINES IL 60016	<input type="checkbox"/> Delete
TITLE NAME VD SCHWARZ, STEVEN R. 2200 E. GOLF RD. DES PLAINES IL	<input type="checkbox"/> Delete
TITLE NAME VD BUSHELL, DANIEL H. 2200 E. GOLF RD. DES PLAINES IL	<input type="checkbox"/> Delete
TITLE NAME T PRIBEL, JAMES A 2200 E GOLF RD. DES PLAINES IL	<input type="checkbox"/> Delete
TITLE NAME V HELTON, THOMAS R 2200 E. GOLF RD. DES PLAINES IL 60016	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME MALONEY-MEYER, SUSAN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Michael J. Cooke* **MICHAEL J. COOKE, VP TAXES 1/6/00 (847)-699-5000**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)