

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# V01738

FILED
Jan 30, 2002 8:00 AM
Secretary of State

Entity Name: CSM-MONENCO, INC.

Current Principal Place of Business:

14100 58TH ST. NORTH
CLEARWATER, FL 33760

New Principal Place of Business:

Current Mailing Address:

801 - 6TH AVENUE SW
900 MONENCO PLACE
CALGARY ALBERTA CANADA, CA t2p 3w3

New Mailing Address:

801 - 6TH AVENUE SW
900 MONENCO PLACE
CALGARY ALBERTA CANADA, CA T2P 3W3

FEI Number: 13-3639835

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUACKENBUSH, MICHAEL P
14100 58TH STREET NORTH
CLEARWATER, FL 33760 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VSTD () Delete
Name: QUACKENBUSH, MICHAEL, P.
Address: 14100 58TH ST. NORTH
City-St-Zip: CLEARWATER, FL

Title: AST () Delete
Name: BRAID, KATHARINE
Address: 36 TORONTO STREET
City-St-Zip: TORONTO ONTARIO CANADA, CA M5C 2C5

Title: PD () Delete
Name: BROWN, R.V.
Address: 14100 58TH STREET N.
City-St-Zip: CLEARWATER, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHARINE BRAID

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01/30/2002

Electronic Signature of Signing Officer or Director

Date