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FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT
1988



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE
1988 MAR -1 11 2 07
FEDERAL BUREAU OF INVESTIGATION
TALLAHASSEE, FLORIDA

9225 10/11/88

Read Instructions and Print in Ink on Only Side Before Making Entries
Filing Fee of \$25 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

558331
TOTAL DISTRIBUTION SYSTEMS INC.
1111 IMESON PARK BLVD
JACKSONVILLE, FL 32218

If above address is incorrect in any way enter the correct address
in item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida

01/27/1978

4. Federal Employer Identification Number (EIN)

59-1797190

5. Date of Last Report

03/10/1987

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1987

1	Names of Officers and Directors	2 Title	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State	5
1	DUNCAN, BRIAN R	S/T/D	200 BROADWAY STREET	TILLSONBURG, CAN	00000
2	OUTERSON, DAVE	D	1111 IMESON PARK BLVD	JACKSONVILLE, FL	00000
3	LOGAN, THOMAS	P/D	301 TILLSON AVE	TILLSONBURG, CAN	
4					
5					
6					
7					
8					
9					
10					

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

WEINSTEIN, IRVIN H
1300 GULF LIFE DRIVE
JACKSONVILLE, FL
32207

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84

FL

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____

(Registered Agent Accepting Appointment)

DATE _____

10. If a foreign corporation, date first transacted business in Florida _____

11. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.

I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath.

(Officer or Director signing must be listed in Block 6)

Signature _____

Date

Feb 16/88

Typed Name of Signing Officer or Director

Title

Telephone Number

B.R. Duncan

Vice President Finance

519-842-4211

12. Should you desire a certificate of status check the box.

CERTIFICATE OF STATUS DESIRED ☐

SS Additional Fpd required for a Certificate of Status

CRF004 (1/88)