

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 847226 (8)

1. Corporation Name

SWIFT-ECKRICH, INC.



Principal Place of Business

2001 BUTTERFIELD RD
DOWNERS GROVE IL 60515-1050

Mailing Address

2001 BUTTERFIELD RD
DOWNERS GROVE IL 60515-1050

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

25 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified
10/16/1980

3a. Date of Last Report
05/01/1995

4. FEI Number
36-3083857

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM, INC
1201 HAYES ST
STE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOT E- Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD
STREET ADDRESS LOCHMANN, L.O.
CITY-ST-ZIP 2001 BUTTERFIELD RD
DOWNERS GROVE IL 60515

TITLE ☒ DELETE

NAME V
STREET ADDRESS THIESEN, GREGORY
CITY-ST-ZIP 2001 BUTTERFIELD ROAD
DOWNERS GROVE IL

TITLE ☐ DELETE

NAME VS
STREET ADDRESS GOTT, D.C.
CITY-ST-ZIP 2001 BUTTERFIELD RD.
DOWNERS GROVE IL 60515

TITLE ☐ DELETE

NAME S
STREET ADDRESS BADBERG, S.
CITY-ST-ZIP ONE CONAGRA DR
OMAHA NE 68102

TITLE ☐ DELETE

NAME V
STREET ADDRESS THOMAS, L.B.
CITY-ST-ZIP ONE CONAGRA DRIVE
OMAHA NE 68102

TITLE ☐ DELETE

NAME V
STREET ADDRESS DILL, JOHN J.
CITY-ST-ZIP ONE CONAGRA DR
OMAHA NE 68102

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

V ☒ Change ☐ Addition

WHITE, ROBERT N.
2001 BUTTERFIELD ROAD
DOWNERS GROVE, IL 60515

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

Robert N. White
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/96
Date

708 512-1000
Daytime Phone #

CR2E034 (12/95)