

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 01 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 847226 (8)
1. Corporation Name
SWIFT-ECKRICH, INC.



Principal Place of Business
8001 BUTTERFIELD RD
DOWNERS GROVE IL 60515-1050

Mailing Address
2001 BUTTERFIELD RD
DOWNERS GROVE IL 60515-1050

3. Date Incorporated or Qualified
10/16/1980

3a. Date of Last Report
05/01/1996

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

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

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
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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	LOCHMANN, L.O.	
STREET ADDRESS	2001 BUTTERFIELD RD	
CITY-ST-ZIP	DOWNERS GROVE IL 60515	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	WHITE, ROBERT N.	
STREET ADDRESS	2001 BUTTERFIELD ROAD	
CITY-ST-ZIP	DOWNERS GROVE IL	
TITLE	VS	<input type="checkbox"/> DELETE
NAME	GOTT, D.C.	
STREET ADDRESS	2001 BUTTERFIELD RD.	
CITY-ST-ZIP	DOWNERS GROVE IL 60515	
TITLE	S	<input type="checkbox"/> DELETE
NAME	BADBERG, S.	
STREET ADDRESS	ONE CONAGRA DR	
CITY-ST-ZIP	OMAHA NE 68102	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	THOMAS, L.B.	
STREET ADDRESS	ONE CONAGRA DRIVE	
CITY-ST-ZIP	OMAHA NE 68102	
TITLE	V	<input type="checkbox"/> DELETE
NAME	DILL, JOHN J.	
STREET ADDRESS	ONE CONAGRA DR	
CITY-ST-ZIP	OMAHA NE 68102	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	A. V. PISHA
2.3 STREET ADDRESS	2001 Butterfield Rd.
2.4 CITY-ST-ZIP	Downers Grove, IL 60515
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Liddle, Rodney
5.3 STREET ADDRESS	2001 Butterfield Rd.
5.4 CITY-ST-ZIP	Downers Grove, IL 60515
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 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: X PISHA

CR2E034 (9/96)