

2002 UNIFORM BUSINESS REPORT (UBR)

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

01-30-2002 90157 004 ***150.00

DOCUMENT # F00000003981

1. Entity Name
PAMECO CORPORATION

Principal Place of Business

**651 CORPORATE CIRCLE
 #200
 GOLDEN CO 80401
 US**

Mailing Address

**651 CORPORATE CIRCLE
 #200
 GOLDEN CO 80401
 US**

2. Principal Place of Business

651 CORPORATE CR.

Suite, Apt. #, etc.
#200

City & State
GOLDEN CO.

Zip
80401

Country
JEFFERSON

3. Mailing Address

651 CORPORATE CR.

Suite, Apt. #, etc.
#200

City & State
GOLDEN CO.

Zip
80401

Country
JEFFERSON



DO NOT WRITE IN THIS SPACE

4. FEI Number

51-0287654

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525**

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

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

(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, 2002 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
 STREET ADDRESS
 CITY-ST-ZIP
**PCEO
 WALKER, DIXON R
 100 CENTER PLACE
 NORCROSS GA 30093** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**CEO
 WALKER, DIXON
 651 CORPORATE CIRCLE, SUITE 200
 GOLDEN CO 80401** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**CFO
 HILEMAN, STEVE
 651 CORPORATE CIRCLE, SUITE 200
 GOLDEN CO 80401** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VP
 MONARK, JOHN
 651 CORPORATE CIRCLE, SUITE 200
 GOLDEN CO 80401** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VP
 COOK, TOM
 651 CORPORATE CIRCLE, SUITE 200
 GOLDEN CO 80401** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VP
 NOHELTY, KEVIN
 651 CORPORATE CIRCLE, SUITE 200
 GOLDEN CO 80401** ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**PCEO
 WALKER, DIXON R.
 651 CORPORATE CR. STE #200
 GOLDEN, CO. 80401** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ 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:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/02
 Date

303-568-1270
 Daytime Phone #

CR2E034 (9/01)