

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 29, 2001 8:00 am
Secretary of State

08-29-2001 90008 040 ***550.00

0106260 AT

DOCUMENT # F00000007176

1. Entity Name
CUNNINGHAM GRAPHICS INC.

Principal Place of Business
ONE ADP BLVD.
ROESELAND NJ 07068

Mailing Address
ONE ADP BLVD.
ROESELAND NJ 07068



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **22-2478136**

Applied For
 Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NRAI SERVICES, INC.
526 EAST PARK AVENUE
TALLAHASSEE FL 32301

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 _____ (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 \$550.00
After September 12, 2001 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME **PD BENSON, JAMES B**
 STREET ADDRESS **ONE ADP BLVD.**
 CITY-ST-ZIP **ROESELAND NJ 07068** ☐ Delete

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

TITLE
 NAME **VD HAVILAND, RICHARD J**
 STREET ADDRESS **ONE ADP BLVD.**
 CITY-ST-ZIP **ROESELAND NJ 07068** ☒ Delete

TITLE
 NAME **VDC KAREN DYKSTRA**
 STREET ADDRESS **ONE ADP BLVD**
 CITY-ST-ZIP **ROESELAND, NJ 07068** ☒ Change ☐ Addition

TITLE
 NAME **T COLOTTI, RAYMOND L**
 STREET ADDRESS **ONE ADP BLVD.**
 CITY-ST-ZIP **ROESELAND NJ 07068** ☐ Delete

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

TITLE
 NAME **D SINGER, ROBERT J**
 STREET ADDRESS **ONE ADP BLVD.**
 CITY-ST-ZIP **ROESELAND NJ 07068** ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

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:

ROBERT J. SINGER
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/21/01
 Date

973-974-5527
 Daytime Phone #

CR2E034 (5/01)