

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F94000001498

FILED
Mar 25, 2002 8:00 AM
Secretary of State

Entity Name: CORNWALL & STEVENS SOUTHEAST, INC.

Current Principal Place of Business:

3280 POINTE PARKWAY
SUITE 1800
NORCROSS, GA 30092

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 920219
NORCROSS, GA 30092

New Mailing Address:

FEI Number: 58-1133361

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEE, Y. JOHN
Address: TWO PINE TREE DRIVE
City-St-Zip: ARDEN HILLS, MN 55112

Title: S () Delete
Name: PINGATORE, JOSEPH J.
Address: TWO PINE TREE DRIVE
City-St-Zip: ARDEN HILLS, MN 55112

Title: TD () Delete
Name: ROHDE, STEPHEN L
Address: TWO PINE TREE DR.
City-St-Zip: ARDEN HILLS, MN 55112

Title: D () Delete
Name: REISS, ALAN T
Address: TWO PINE TREE DRIVE
City-St-Zip: ARDEN HILLS, MN 55112

Title: D () Delete
Name: VAN HOUTEN, JAMES F
Address: TWO PINE TREE DR.
City-St-Zip: ARDEN HILLS, MN 55112

Title: D () Delete
Name: GASPER, KOVACH JR
Address: 5916 SR 540 PO BOX K
City-St-Zip: WAVERLY, FL 33877

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: REISS, ALAN T
Address: TWO PINE TREE DRIVE
City-St-Zip: ARDEN HILLS, MN 55112

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH J. PINGATORE

AS

03/25/2002

Electronic Signature of Signing Officer or Director

Date

PAUL M. HARMON; SECRETARY
1701 N TOWANDA AVENUE
BLOOMINGTON, IL 61702

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