2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F9400003853 CORPORATE EXPRESS DOCUMENT & PRINT MANAGEMENT I

FILED Apr 03, 2000 8:00 am Secretary of State

Principal Place			04-03-2000 90124 035 ***150.00						
rincipairiac	e of Business	Mailing Address							
4205 S. 96TH ST. OMAHA NE 68127		4205 S. 96TH ST. OMAHA NE 68127-1208			.				
		-				 			
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE II	N THIS SPACE			
City & State		City & State		4. FEI	Number 47-0445942		$\overline{}$	plied For t Applicable	
Zip	Country	Zip	Country	5. Cert	ificate of Status Desired	□ \$8.7		litional	
	6. Name and Address of Curre	nt Registered Agent		7. Nam	e and Address of New Regi			<u> </u>	
			Name						
	Corporation System S. Pine Island Rd.		Street Address		s (P.O. Box Number is Not Acceptable)				
	NTATION FL 33324								
			City			FL Zip	p Code		
8. The above	named entity submits this statement	for the purpose of changing its	s registered office or regis	stered agent,	or both, in the State of Florida				
SIGNATURE .	Signature, typed or printed name of registered ag	ent and title if applicable (NOT	E. Registered Agent signature req	ired when reinsta	ting)	DATE			
	pration is eligible to satisfy its Intangi		!!! FEE IS \$150.00		In Florida Constitution Florida		фг О		
	requirement and elects to do so.	After MAY 1, 20	After MAY 1, 2000 Fee will be \$550.00		Election Campaign Finance Trust Fund Contribution.	· —		O May Be to Fees	
(See criter	ria on back)	Make Check Paya	ble to Department of	i					
11.	OFFICEDO AN								
		JD DIRECTORS	12.	ADDIT	IONS/CHANGES TO OFFICE				
TITLE	CPD	Delete	TITLE	ADDIT	IONS/CHANGES TO OFFICE	RS AND DIREC		S IN 11	
NAME	CPD KEARNS, WALTER J		TITLE NAME	ADDIT	IONS/CHANGES TO OFFICE				
NAME STREET ADDRESS	CPD Kearns, Walter J 4205 S. 96th St.		TITLE NAME STREET ADDRESS	ADDIT	TONS/CHANGES TO OFFICE				
NAME STREET ADDRESS CITY-ST-ZIP	CPD KEARNS, WALTER J 4205 S. 96TH ST. OMAHA NE	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDIT	TIONS/CHANGES TO OFFICE	C	hange	☐ Addition	
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of the corporation or the receiver or fustee 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.

TED NAME OF SIGNING OFFICER OR DIRECTOR

402-898-6322

TIAL.

4205 South 96th Street Omaha, NE 68127

AHach. C0050366 F94000003853



CERTIFICATE OF INCUMBENCY

The undersigned, Lynn A. Johnson, Assistant Secretary of Corporate Express Document & Print Management, Inc., hereby certifies that the following named persons currently hold the position(s) appearing next to his or her name:

<u>Title</u>	<u>Name</u>
President	Walter Kearns
Vice President and Assistant Secretary	A. Robert Thomas
Vice President	Gary M. Jacobs
Vice President	Morris Caudle
Vice President and Secretary	Richard L. Millett, Jr.
Vice President and Treasurer	John T. Skinner
Assistant Treasurer	Richard Egan
Assistant Secretary	Linda McConnon
Assistant Secretary	Lynn A. Johnson

IN WITNESS WHEREOF, I have executed this Certificate as of this 11th day of November, 1999.

Assistant Secretary

Document & Print Management

4205 South 96th Street Omaha, NE 68127 AHachment C0050366 # F94000003853



Corporate Express Document & Print Management, Inc. List of Directors

Walter J. Kearns 4205 South 96th Street Omaha, NE 68127

Robert L. King 1 Environmental Way . Broomfield, CO 80021