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Jul 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 # F95000001565 (9)

1. Corporation Name

CORPORATE EXPRESS OF THE SOUTH, INC.

Principal Place of Business

4953 S 48TH AVENUE. W
TULSA OK 74107
US

Mailing Address

325 INTERLOCKEN PKWY
BROOMFIELD CO 80021-3484
US



3. Date Incorporated or Qualified

03/31/1995

3a. Date of Last Report

05/29/1996

4. FEI Number

51-0305216

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 5100 E. Skelly Dr.

Suite, Apt. #, etc.

22 #700

City & State

23 Tulsa, OK

Zip

24 74135

Country

25

2a. Mailing Address

26 1 Environmental Way

Suite, Apt. #, etc.

City & State

28 Broomfield, CO

Zip

29 80021-3416

Country

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME KING, ROBERT L
STREET ADDRESS 325 INTERLOCKEN PARKWAY
CITY-ST-ZIP BROOMFIELD CO

TITLE V ☐ DELETE

NAME JACOBS, GARY M
STREET ADDRESS 325 INTERLOCKEN PARKWAY
CITY-ST-ZIP BROOMFIELD CO

TITLE VT ☐ DELETE

NAME JOHN SKINNER
STREET ADDRESS 325 INTERLOCKEN PARKWAY
CITY-ST-ZIP BROOMFIELD CO

TITLE S ☐ DELETE

NAME MILLETT, RICHARD L
STREET ADDRESS 325 INTERLOCKEN PARKWAY
CITY-ST-ZIP BROOMFIELD CO

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/D ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 1 Environmental Way
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 1 Environmental Way
2.4 CITY-ST-ZIP

3.1 TITLE V ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS 1 Environmental Way
3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS 1 Environmental Way
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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

CR2E034 (9/96)