## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F96000004935 (0)

INGRAM MICRO INC. OF DELAWARE

Principal Place of Business

Mailing Address

## FILED May 13 1997 8:00am Secretary of State



1000 EAST ST SANTA ANA C	ANDREWS PLACE A 92705	1600 EAST ST ANDREWS PLACE SANTA ANA CA 92705-4931									
						3.	Date Incorporated or Qualific 09/23/1996	d <b>3a.</b> [	3a. Date of Last Report		
2. Principal P	lace of Business	2a. Mailing Address				4.	FEI Number			Applied For	
21		26					Y5 [Y-] 11Y5			Not Applicable	
Sulte, Apt.		Suite, Apt. #, etc.				5.	Certificate of Status Desired		Fee Required		
City & State		City & State	28			6.	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip 24	Country 25 9. Name and Address of Curren	Zip [29]	Country 30				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No				
		81	10. Name and Address of New Registered Agent								
C T CORPORATION SYSTEM					Name	<del>)</del>					
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				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					o-named	d corporation	on submits this statement for th	e purpose -	of changir	ng its registered	
office or registered agont, 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								**************************************			
12,	Signature typed or printed name of registered agent and title if applicable (NOTE fregister  12. OFFICERS AND DIRECTORS  13.				ni signature			DATE EICEDS AN	ID DIDEC	TOPS IN 12	
TITLE	C	DELETE	11 ]	 11 F		5	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  Change				
NAME	STEAD, JERRE L		1.2 N/			RANDA	ALL L. GOODMAN				
STREET ADORESS	4444 44 4115 5 5 4 4 4 4 4 4 4 4 4 4 4 4		1. <b>3</b> \$1	1.3 STREET ADDRESS   6 G		1600	ST ANDREWPL	ACE			
CITY-ST-ZIP	SANTA ANA CA	1.4 0		1.4 CITY-ST-ZIP SA		SANT	A ANA, CA 98	1705		,	
TITLE	<b>V</b> 0	☐ DELETE	2.1 TI	ILE					Char	ge 🔲 Addition	
NAME	DUKES, DAVID R		2.2 N/	AME							
STREET ADDRESS	1600 ST ANDREWS PLACE		2.3 \$1	REET	ADDRESS						
CITY-ST-ZIP	SANTA ANA CA		2. 4 CHY-		ST-ZIP				<del></del>		
TALE	PD DELETE 3.17				1			☐ Chan	ige L. Addition		
NAME	RODEK, JEFFREY R										
STREET ADDRESS	and the same and t			3.3 STREET ADDRESS 3.4. City-St-Zip		]					
CITY-ST-ZIP TITLE	VS	DELFTE	4 1 THILE		ST-ZIP				☐ Char	ge Addition	
NAME	ANDERSON JR, JAMES E	- Jour 12	4 2 N							5 500 1000000	
STREET ADDRESS			1		ADDRESS	1					
CITY-ST-ZIP	NASHVILLE TN		4.4 CHTY								
TITLE	V	DELETE	5.1 10			ļ			Char	ige Addition	
NAME	ANTONE, DOUGLAS R		5.2 N/	AME							
STREET ADDRESS	1700 E ST ANDREW PLACE		5.3 STREE		ADURESS					j	
CITY-ST-ZIP	SANTA ANA CA		5.4 CI	1 <b>Y</b> · \$	1-2(P						
TITLE	V	X) DEFETE	6.1 TI	6.1 TITLE					☐ Char	ige Addition	
NAME	ELLETT, PHILIP D		6.2 N/								
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP	SANTA ANA CA			TY - S	1 - 7IP						

I do hereby certify that the information empirical with this ding 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 capportion or the reportion or the reportion or the report of the capport as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 if chapted or on aw attachment with an address

CICNATURE.

Day Barton

11/28/92

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