

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

FILED

Jan 16 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F97000000631 (8)

1. Corporation Name

SEDGWICK INVESTMENTS, INC.

Principal Place of Business

1000 RIDGEWAY LOOP ROAD
MEMPHIS TN 38120

Mailing Address

1000 RIDGEWAY LOOP ROAD
MEMPHIS TN 38120

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/04/1997

4. FEI Number

62-1538913

Applied For

Not Applicable

6. 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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

Principal Place of Business

2a. Mailing Address

26. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

27. City & State

27. City & State

28. Country

28. Zip

29. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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	<input type="checkbox"/> DELETE
NAME	REILLY, MICHAEL J	
STREET ADDRESS	1000 RIDGEWAY LOOP ROAD	
CITY- ST- ZIP	MEMPHIS TN 38120	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	O'DAY, JOHN E	
STREET ADDRESS	1000 RIDGEWAY LOOP ROAD	
CITY- ST- ZIP	MEMPHIS TN 38120	
TITLE	S	<input type="checkbox"/> DELETE
NAME	ROBINSON, PATTIE J	
STREET ADDRESS	1000 RIDGEWAY LOOP ROAD	
CITY- ST- ZIP	MEMPHIS TN 38120	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	DICKERSON, CARMEN	
STREET ADDRESS	1000 RIDGEWAY LOOP ROAD	
CITY- ST- ZIP	MEMPHIS TN 38120	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	MCBRIDE, R M	
STREET ADDRESS	3 BECKER FARM ROAD	
CITY- ST- ZIP	ROSELAND NJ 07068	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	VD
2.3 STREET ADDRESS	Kranon, Gerald J.
2.4 CITY- ST- ZIP	3 Becker Farm Rd. Roseland, NJ 07068
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	T
4.3 STREET ADDRESS	Allen, William
4.4 CITY- ST- ZIP	1000 Ridgeway Loop Rd. Memphis TN 38120
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	D
5.3 STREET ADDRESS	Johnson, Donn A.
5.4 CITY- ST- ZIP	One Ivybrook Blvd. Suite 101A Wheatridge, PA 18974
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	D
6.3 STREET ADDRESS	Jones, David L
6.4 CITY- ST- ZIP	West 601 Main Suite 1400 Spokane, WA 99201

14. 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 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:

[Signature] Secretary of State 1/5/98

CR2E034 (10/97)