

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 10, 2003 8:00 am**  
**Secretary of State**

02-10-2003 90165 019 \*\*\*150.00

**DOCUMENT # F97000001454**



1. Entity Name  
**TELETECH FACILITIES MANAGEMENT (PARCEL CUSTOMER SUPPORT), INC.**

Principal Place of Business  
**111 US HWY 301 S  
TAMPA FL 33619  
US**

Mailing Address  
**% TAX DEPARTMENT  
9197 S PEORIA STREET  
ENGLEWOOD CO 80203**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **84-1380158**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525**

Name

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

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TUCHMAN, KENNETH 9197 S PEORIA STREET ENGLEWOOD CO 80112 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KAUFMAN, JAMES B 9197 S PEORIA STREET ENGLEWOOD CO 80112 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BATSON, CHRISTOPHER 9197 S PEORIA STREET ENGLEWOOD CO 80112 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFOD O'DELL, MARGOT 9197 S PEORIA STREET ENGLEWOOD CO 80112 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP FOSS, MICHAEL 9197 S PEORIA STREET ENGLEWOOD CO 80112 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS O'CONNOR, CRISTY 9197 S PEORIA STREET ENGLEWOOD CO 80112 <input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Sean Erickson 9197 S. Peoria Street Englewood, CO 80112 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Sharon O'Leary 9197 S. Peoria Street Englewood CO 80112 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Karen Breen 9197 S. Peoria Street Englewood, CO 80112 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

**1/14/03**

**303.397.8190**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**ASST. SECRETARY**

Date Daytime Phone #

CR2E034 (10/02)

*Attachment*

2003 For Profit Corporation Uniform Business Report (UBR)  
DOCUMENT # F97000001454

TeleTech Facilities Management (Parcel Customer Support), Inc.  
FEI #: 84-1380158

*80024382*

**OFFICER/DIRECTOR ADDITIONS:**

<b>Title:</b>	Controller	<b>ADDITION</b>
<b>Name:</b>	Jeff Sperber	
<b>Street Address:</b>	9197 S. Peoria Street	
<b>City - St - Zip:</b>	Englewood, CO 80112	