

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000002567

1. Entity Name
CORPORATE EXPRESS DELIVERY SYSTEMS - SOUTHEAST,

APPROVED
AND
FILED

7/16/00

00 JUL 17 PM 3:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business 11 GREENWAY PLAZA, STE 250 HOUSTON TX 77046	Mailing Address 11 GREENWAY PLAZA, STE 250 HOUSTON TX 77046
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 56-1949066	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name: CORPORATION Service Company
Street Address (P.O. Box Number is Not Acceptable)
1201 Hayes St.
City: Tallahassee FL Zip Code: 32301-2607

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.

SIGNATURE: Heidi orah R Skipper DATE: 7-13-00

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GABRIEL, CLARENCE J JR 11 GREENWAY PLAZA, STE 250 HOUSTON TX	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RAMEY, SHON C 11 GREENWAY PLAZA, STE 250 HOUSTON TX	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT SZCZEPANSKI, ADAM 11 GREENWAY PLAZA, STE 250 HOUSTON TX	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS DAVIS, TRACY L 11 GREENWAY PLAZA, STE 250 HOUSTON TX 77046	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KING, ROBERT L 1-ENVIRONMENTAL WAY BROOMFIELD CO 80021	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Jay Waldman 33 E. 33rd St. New York, NY 10016	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Vince Hannigan 11 Greenway Plaza, Suite 250 Houston, TX 77046	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP, T Timothy Becker 11 Greenway Plaza, Suite 250 Houston, TX 77046	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Tracy Downs	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. Timothy Becker 11 Greenway Plaza, Suite 250 Houston, TX 77046	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>[Signature]</u> 400003324564--4	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] DATE: 7-12-00 713-867-5076

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (5/00)

Pg. 2 of 2



ACCOUNT NO. : 072100000032

REFERENCE : 763884 4390774

AUTHORIZATION :

Patricia Pigott

COST LIMIT : \$ 550.00

ORDER DATE : July 14, 2000

ORDER TIME : 10:59 AM

ORDER NO. : 763884-010

CUSTOMER NO: 4390774

CUSTOMER: Tracy Downs, Legal Asst
Corporate Express Delivery
11 Greenway Plaza
Suite 250
Houston, TX 77049

CHANGE OF AGENT

NAME: CORPORATE EXPRESS DELIVERY
SYSTEMS - SOUTHEAST, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Ta-Tanisha Green

RECEIVED
00 JUL 17 AM 11:28
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA