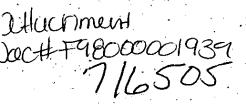
2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F9800001939 1. Entity Name TUCSON NCH CORPORATION							Jan 28, 2002 8:00 am Secretary of State 01-28-2002 90043 046 ***158.75				
Principal Plac		Mailing Address									
6850 N. ORAC TUCSON AZ 6			6850 N. ORACLE ROAD TUCSON AZ 85704								
2. Principal P	Place of Busine	ess	3. Mailing Address	Address			\$ 10081100 1110 10101 10111 00111 0011		{) } 	
Suite, Apt.	#, etc.	-	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & Stat	ė		City & State			4. F	El Number 86-0621685		→	plied For t Applicable	
Zip	p Country		Zip	p Count		5. C	Certificate of Status Desired		.75 Add	itional	
	6. Name a	and Address of Current R	egistered Agent	1		7. N	ame and Address of New Ro				
CORPORATION SERVICE COMPANY					Name	(D.O. D	- North Administration	<u>, </u>			
1201 HAYS STREET					Street Addre	S\$ (P.O. B	ox Number is Not Acceptable)			
TALLAHASSEE FL 32301-2525					City				Zip Code		
8. The above named entity submits this statement for the purpose of changing its							- A - A - A - A - A - A - A - A - A - A	FL		<u> </u>	
Tax filing	oration is eligib	r printed name of registered agent an	FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of Ste			00	nstating) 10. Election Campaign Fina Trust Fund Contribution			0 May Be to Fees	
11.		OFFICERS AND D	IRECTORS Delete	12. TITL	•	AD	DITIONS/CHANGES TO OFFI		RECTORS Change	S IN 11	
TITLE NAME STREET ADDRESS DITY-ST-ZIP	P HANSON, I 1130 CALL TUCSON A	e de la cabra	Delete	NAM STRE	ı			L.	_ Onlinge	Addition	
TITLE NAME STREET ADDRESS	V DIX, RANDA 3415 E. RIV	al G Ver RD.	☐ Delete		1] Change	☐ Addition	
CITY-\$T-ZIP TITLE	TUCSON A		☐ Delete	TITL	E] Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	TUCKER, L 3371 W. O' TUCSON A	verton heights			EET ADDRESS '- ST- ZIP						
TITLE NAME STREET ADDRESS	,	2001142	☐ Delete		EET ADDRESS			C] Change	☐ Addition	
CITY-ST-ZIP FITLE NAME			☐ Delete	TITL	1] Change	Addition	
STREET ADDRESS CITY-ST-ZIP				STRE	EET ADDRESS '-ST-ZIP						
TITLE NAME STREET ADDRESS			☐ Delete	TITL NAM STRE	ı] Change	Addition	
CITY-ST-ZIP	certify that the	information-supplied with t	his filing does not qualify f	CITY	-ST-ZIP	Section 1		further certify	that the in	formation	
of the cor	poration or the	or supplemental report is to receiver or trustee empoy chment with an address, with the receiver of the receiver or trustee empoy chment with an address, with the receiver of	vered to execute this repo	rt as requi	ture shall have red by Chapter	the same l 607, Florid	l 19.07(3)(i), Florida Statutes. I egal effect as if made under d da Statutes; and that my name	ath; that I am appears in B	an officer lock 11 or	or director Block 12 if	
SIGNAT	URE: _	SINDARD	INTED NAME OF SIGNING OFFICE		TOR		Date	Daytin	ne Phone #	 -	



NCH Corporation

January 7, 2002

DIVISION OF CORPORATOINS
UNIFORM-BUSINESS REPORT FILINGSP. O. Box 1500
Tallahassee, FL 32302

Via: U.S. Mail

Re: NCH Corporation

To Whom It May Concern:

Attached are our annual report and a check for \$158.75. Upon processing of the attached we would like to request a Certificate of Status be mailed to us.

Thank you for your time and please feel free to call me should you need anything else or have any questions.

Sincerely,

M/ 188

NCH Corporation