

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000006999

1. Entity Name

DISCOUNT LABELS, INC.

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90062 046 ***150.00

Principal Place of Business

Mailing Address

PO BOX 709
NEW ALBANY IN 47151

PO BOX 709
NEW ALBANY IN 47151-0709

00088000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4100 Earnings Way

Suite, Apt. #, etc.

3. Mailing Address

23 Inverness Way East

Suite, Apt. #, etc.

Suite 160

City & State

New Albany, IN

City & State

Englewood, CO

4. FEI Number

35-1119834

Applied For

Not Applicable

Zip

47151

Country

USA

Zip

80112

Country

USA

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

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

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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 \$150.00
After MAY 1, 2000 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Delete

NAME CONWAY, ALLEN C
STREET ADDRESS 5810 MOSER KNOB ROAD
CITY-ST-ZIP FLOYDS KNOBS IN 47119

TITLE EV ☒ Delete

NAME ARLEDGE, WINIFRED B
STREET ADDRESS 5780 MOSER KNOB ROAD
CITY-ST-ZIP FLOYDS KNOBS IN 47119

TITLE S ☒ Delete

NAME GRAY, DAWN M
STREET ADDRESS 2100 RIVEREDGE PKWY., SUITE 1200
CITY-ST-ZIP ATLANTA GA 30328

TITLE EV ☒ Delete

NAME ARLEDGE, SOL A
STREET ADDRESS 5780 MOSER KNOB ROAD
CITY-ST-ZIP FLOYDS KNOBS IN 47119

TITLE C ☒ Delete

NAME GELLERSTEDT, LARRY L III
STREET ADDRESS 2485 WEST WESLEY ROAD
CITY-ST-ZIP ATLANTA GA 30309

TITLE D ☒ Delete

NAME SMITH, RICHARD G
STREET ADDRESS 303 CHASE LANE
CITY-ST-ZIP MARIETTA GA 30068

TITLE P ☐ Change ☒ Addition

NAME Reilly, Paul V.
STREET ADDRESS 23 Inverness Way East
CITY-ST-ZIP Englewood, CO 80112

TITLE CEO ☐ Change ☒ Addition

NAME Mahoney, Gerald F.
STREET ADDRESS 23 Inverness Way East
CITY-ST-ZIP Englewood, CO 80112

TITLE Sr. VP/CFO, ☐ Change ☒ Addition

NAME Ritondaro, Gary H.
STREET ADDRESS 23 Inverness Way East
CITY-ST-ZIP Englewood, CO 80112

TITLE VP/S/D ☐ Change ☒ Addition

NAME Wertheimer, Roger
STREET ADDRESS 23 Inverness Way East
CITY-ST-ZIP Englewood, CO 80112

TITLE VP/T/D ☐ Change ☒ Addition

NAME Meyer, Robert
STREET ADDRESS 23 Inverness Way East
CITY-ST-ZIP Englewood, CO 80112

TITLE AS/D ☐ Change ☒ Addition

NAME Zoeller, Mark L.
STREET ADDRESS 23 Inverness Way East
CITY-ST-ZIP Englewood, CO 80112

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:

Robert Meyer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/20/00

Date

303-790-8023

Daytime Phone #

CR2E034 (9/99)