

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J32665 (8)

1. Corporation Name

UNIT DISTRIBUTION OF COLORADO, INC.



Principal Place of Business

1301 RIVERPLACE BLVD
1200
JACKSONVILLE FL 32207
US

Mailing Address

1301 RIVERPLACE BLVD
1200
JACKSONVILLE FL 32207
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

09/10/1986

3a. Date of Last Report

05/01/1995

4. FEI Number

59-2739446

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME
DVS
MOORE, DANIEL D.
STREET ADDRESS
1301 RIVERPLACE BLVD SUITE 1200
CITY-ST-ZIP
JACKSONVILLE FL

☐ Change ☐ Addition

TITLE ☒ DELETE

NAME
T
DUNN, E. PAUL, JR.
STREET ADDRESS
500 W MONROE
CITY-ST-ZIP
CHICAGO IL

☒ Change ☒ Addition

TITLE ☐ DELETE

NAME
DP
NICOSIA, JOSEPH A
STREET ADDRESS
1301 RIVERPLACE BLVD SUITE 1200
CITY-ST-ZIP
JACKSONVILLE FL

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
AS
LEVIN, JOHN D
STREET ADDRESS
500 W MONROE
CITY-ST-ZIP
CHICAGO IL

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
D
GARDNER, MICHAEL J
STREET ADDRESS
1301 RIVERPLACE BLVD SUITE 1200
CITY-ST-ZIP
JACKSONVILLE FL

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
AT
BRANDT, SANDRA K
STREET ADDRESS
500 W MONROE
CITY-ST-ZIP
CHICAGO IL

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/08/96

(904) 396-5517

Date

Daytime Phone #

CR2E034 (12/95)