

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 20, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P04000044342**

1. Entity Name  
**CARDINAL-UNICO HOLDING COMPANY**



Principal Place of Business  
**1830 SECOND AVE NORTH  
LAKE WORTH, FL 33461**

Mailing Address  
**1830 SECOND AVE NORTH  
LAKE WORTH, FL 33461**



02092006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**20-0856910**

Applied For  
**Not Applicable**

5. Certificate of Status Desired ☐ **\$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**

**DO NOT WRITE  
IN THIS SPACE**

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 *Christopher A. Bohlman Pres.*

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

(NOTE: Registered Agent signature required when reappointing)

**2/13/06**

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

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

**1100000439273  
03/01/06-80038-007 300.00**

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**PRES  
BOHLMAN, CHRISTOPHER A  
1830 SECOND AVE NORTH  
LAKE WORTH, FL 33461**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**DIR  
FINNEGAN, EDWARD G JR  
311 SOTH WACKER DR, SUITE 5500  
CHICAGO, IL 60606**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**DIR  
MCINERNEY, JOSEPH  
311 SOUTH WACKER DRIVE, SUITE 5500  
CHICAGO, IL 60606**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**CFO  
TSANG, CARL  
1830 SECOND AVE NORTH  
LAKE WORTH, FL 33461**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Christopher A. Bohlman Pres.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/13/06 561-582-3030**

Date

Daytime Phone #