

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 JUL -5 AM 8:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P16228 (9)

1. Corporation Name

UNUM SALES CORPORATION

Principal Place of Business

**2211 CONGRESS STREET
PORTLAND ME 04122**

Mailing Address

**2211 CONGRESS STREET
PORTLAND ME 04122**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/02/1987	3a. Date of Last Report 02/17/1994
4. FEI Number 01-0285776	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. Does corporation have liability for damages under Chapter 199-002 Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. # etc.

26. Suite, Apt. # etc.

22. City & State

27. City & State

23. City

28. City

24. State

29. State

30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83. City

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, this above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in this 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 of Registered Agent or Director

Signature of Registered Agent or Director

(11)

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	T LEA, GORDON 2211 CONGRESS STREET PORTLAND ME	NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY, ST. ZIP		CITY, ST. ZIP	
NAME	D ANDERSON, RUSSELL 2211 CONGRESS STREET PORTLAND ME	NAME	☒ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY, ST. ZIP		CITY, ST. ZIP	
NAME	D O'CONNELL, KEVIN 2211 CONGRESS STREET PORTLAND ME	NAME	☒ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY, ST. ZIP		CITY, ST. ZIP	
NAME	D CENTER, STEPHEN B. 2211 CONGRESS STREET PORTLAND ME	NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY, ST. ZIP		CITY, ST. ZIP	
NAME	P SMITH, STEPHEN L. 2211 CONGRESS ST. PORTLAND ME	NAME	☒ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY, ST. ZIP		CITY, ST. ZIP	
NAME	S LEE, JOAN SARLES 2211 CONGRESS ST. PORTLAND ME	NAME	☒ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY, ST. ZIP		CITY, ST. ZIP	

14. I, the undersigned, certify that the information supplied with this form is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information reflected on this annual report or biennial 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 position appears in Block 12 or Block 13. If changed, or pay an attachment with an address.

SIGNATURE:

Ann C. Madigan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OFFICER OR DIRECTOR
ANN C. MADIGAN

6-28-95 (207) 770-2211

CR2E034 (3/95)