

APPROVED
AND
FILED

95 MAY -1 AM 4:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



$\frac{1}{\sqrt{\pi}} \int_{-\infty}^{\infty} f(x) e^{-x^2} dx = \frac{1}{\sqrt{\pi}} \int_{-\infty}^{\infty} f(x) e^{-x^2} dx$

DOCUMENT # P30521 (9)
ADVACARE, INC.

9696 SKILLMAN
SUITE 325
DALLAS TX 75243
US

9696 SKILLMAN
SUITE 325
DALLAS TX 75243
US

21	2700 Cumberland Pkwy.
22	Suite 300
23	Atlanta, GA
24	3033A
25	USA

2a. Name of Applicant
26 2700 Cumberland Pkwy.
27 Suite 300
28 Atlanta, GA
29 30339 30 USA

3. 08/13/1990	3a. 06/21/1994
4. 04-2902582	Agenda Item Not Applicable
5. \$8.75 Additional Fee Required	
6. \$5.00 May Be Added to Fees	
7. X	

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

10. Name and Address of New Registered Agent	
FL	85

[illegible]

2018年12月15日

12	CD
NAME	ERGOTT, HAROLD L. J
ADDRESS	16127 E. POWDER HORN
CITY	FOUNTAIN HILLS AZ
STATE	PD
NAME	RONE, B.J.
ADDRESS	3000 ST. GERMAIN
CITY	PLANO TX
STATE	V
NAME	YAU, SAM
ADDRESS	19 DAMARA
CITY	IRVINE CA
STATE	V
NAME	KING, JOHN
ADDRESS	1204 JANWOOD
CITY	PLANO TX
STATE	VS
NAME	MERRICK, TAG
ADDRESS	3201 BRIDLE PATH CT.
CITY	GARLAND TX
STATE	VT
NAME	KEHOE, TODD
ADDRESS	621 SPANKY BRANCH
CITY	DALLAS TX

NAME	ADDRESS	CITY	STATE	ZIP	DATE	TIME	STATUS	REMARKS
CID	Prandolph G. Brown	2700 Cumberland Pkwy., Stc. 300	Atlanta, GA	30339			☒	
CID	Timothy J. Kilgallon	2700 Cumberland Pkwy., Stc. 300	Atlanta, GA	30339			☒	
PID	Gene P. Kaczmarek	2700 Cumberland Pkwy., Stc. 300	Atlanta, GA	30339			☒	
VISID	Michael R. COTE	2700 Cumberland Pkwy., Stc. 300	Atlanta, GA	30339			☒	
VIS	Pamela S. Topper	2700 Cumberland Pkwy., Stc. 300	Atlanta, GA	30339			☒	
T	Caryn S. Dickerson	2700 Cumberland Pkwy., Stc. 300	Atlanta, GA	30339			☒	

[illegible]

SIGNATURE:

Signature and typed or printed name of person on field card

PAMELA S. TOPPER

4-19-55

(404)319-3300

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

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # P30527 (6)
1. Corporation Name
THEATER ACQUISITION COMPANY

Principal Place of Business: **2121 PONCE DE LEON BLVD
SUITE 920
CORAL GABLES FL 33134**
Mailing Address: **2121 PONCE DE LEON BLVD
SUITE 920
CORAL GABLES FL 33134**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **08/14/1990** 3a. Date of Last Report: **02/08/1994**
4. FEI Number: **74-2576911** 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**
7. This corporation has liability for unpaid fees under Chapter 132, Florida Statutes: ☐ Yes ☐ No

2. Principal Place of Business: **21** 2b. Mailing Address: **26**
Suite, Apt. #, etc.: **22** Suite, Apt. #, etc.: **27**
City & State: **23** City & State: **28**
County: **24** County: **25** County: **29** County: **30**

9. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent
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 (06a) and 607 (150B), 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 (06a), Florida Statutes.

SIGNATURE

Signature of Registered Agent (Required for all filings)

Signature of Person (Individual or Corporation) Submitting this Report

Date

12. OFFICERS AND DIRECTORS
TITLE: **P**
NAME: **MORENO, FRANK**
STREET ADDRESS: **2121 PONCE DE LEON BLVD**
CITY, ST, ZIP: **MIAMI FL**
TITLE: **V**
NAME: **WRAY, JON**
STREET ADDRESS: **2121 PONCE DE LEON BLVD**
CITY, ST, ZIP: **MIAMI FL**
TITLE: **SVS**
NAME: **DREW, CARL**
STREET ADDRESS: **2121 PONCE DE LEON BLVD**
CITY, ST, ZIP: **MIAMI FL**
TITLE: **D**
NAME: **CORMAN, ROGER**
STREET ADDRESS: **11000 SAN VINCENTE BLVD**
CITY, ST, ZIP: **LOS ANGELES FL**
TITLE: **C**
NAME: **MACMILLEN, WILLIAM C JR.**
STREET ADDRESS: **254 VICTORIA PLACE**
CITY, ST, ZIP: **LAWRENCE NY**
TITLE: **D**
NAME: **CHURCHILL, WINSTON**
STREET ADDRESS: **300 CHESTER FIELD PKWY**
CITY, ST, ZIP: **MALVERN PA**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. TITLE: _____ ☐ Change ☐ Addition
2. NAME: _____
3. STREET ADDRESS: _____
4. CITY, ST, ZIP: _____
5. TITLE: _____ ☐ Change ☐ Addition
6. NAME: _____
7. STREET ADDRESS: _____
8. CITY, ST, ZIP: _____
9. TITLE: _____ ☐ Change ☐ Addition
10. NAME: _____
11. STREET ADDRESS: _____
12. CITY, ST, ZIP: _____
13. TITLE: _____ ☐ Change ☐ Addition
14. NAME: _____
15. STREET ADDRESS: _____
16. CITY, ST, ZIP: _____

14. I am hereby certifying that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 139 (02) (b)(1) Florida Statutes. I further certify that the information indicated on the 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 make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 and changed, or on an attachment with an address.

SIGNATURE: *W. C. MacMillen Jr.*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

W. C. MacMillen Jr., Chairman

4/21/95

816-239-4444

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

APPROVED
AND
FILED

May 1 1990

1990

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
JAMES B. WATSON
GOVERNOR OF FLORIDA
TALLAHASSEE, FLORIDA 32399-0001

DOCUMENT # P31217

(3)

ALBERTO-CULVER USA, INC.

Principal Place of Business
2525 ARMITAGE AVENUE
MELROSE PARK IL 60160

2525 ARMITAGE AVENUE
MELROSE PARK IL 60160

PLEASE WRITE IN THIS SPACE

3. Date incorporated in Corporation 10/05/1990	3a. Date of Last Report 05/01/1994
4. FET Number 36-3664158	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. This corporation has liability for intangible tax under S. 190.01, Florida Statutes. ☒ Yes ☐ No	

2. Principal Place of Business 21	2a. Mailing Address 26
State, Apt. # etc. 22	State, Apt. # etc. 27
City & State 23	City & State 28
24	25
29	30

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 190.01, 190.02 and 190.03, 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 attest the appointment as registered agent. I am familiar with and accept the responsibility for compliance with Sections 190.01, Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
OFFICER	CD LAVIN, LEONARD H. 2525 ARMITAGE AVE. MELROSE PARK FL	OFFICER	SEE ATTACHMENT FOR OTHER OFFICERS
NAME	PD BERNICK, HOWARD B. 2525 ARMITAGE AVE. MELROSE PARK FL	NAME	
STREET ADDRESS	VST LAVIN, BERNICE E. 2525 ARMITAGE AVE. MELROSE PARK FL	STREET ADDRESS	
CITY, ST, ZIP	D LAVIN, BERNICE E. 2525 ARMITAGE AVE. MELROSE PARK FL	CITY, ST, ZIP	
OFFICER	VAS BERNICK, CAROL L. 2525 ARMITAGE AVE. MELROSE PARK FL	OFFICER	
NAME	V GOLDBERG 2525 ARMITAGE AVENUE MELROSE PARK IL	NAME	
STREET ADDRESS		STREET ADDRESS	
CITY, ST, ZIP		CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is complete, true and correct, and that I am not qualified for the exemption stated in Section 190.01(2)(b), Florida Statutes. I further certify that the information indicated on this statement is not a request for incorporation, and that I am not qualified for the exemption stated in Section 190.01(2)(b), Florida Statutes. I further certify that I am an officer or director of the corporation or the corporation is being organized to conduct this report as required by Chapter 190, Florida Statutes, and that my name appears on the filing. (Check "I am changed or was an officer/director with no address.")

SIGNATURE: MICHAEL L. GOLDBERG
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
MICHAEL L. GOLDBERG, VICE-PRESIDENT-CONTROLLER
4/22/95 708/450-3956

031217

ALBERTO-CULVER U.S.A., INC.
FEIN: 36-3664158
STATE OF FLORIDA

LIST OF OFFICERS AND DIRECTORS

OFFICERS OF ALBERTO-CULVER USA, INC.

<u>NAME</u>	<u>TITLE</u>
Carol L. Bernick	President
David D. DeTomaso	Senior Vice President, Professional Domestic Division
Bernice E. Lavin	Vice President, Secretary & Treasurer
Michael L. Goldberg	Vice President-Controller
Ronald M. Kirshbaum	Vice President, Food Service Division
John Boone	Group Vice President, Consumer Products
Frederick C. Broda	Vice President, Corporate Development
Anthony J. Borgese	Vice President, Sales, Toiletries Division
James J. Chickarello	Vice President, Manufacturing and Engineering
Kristin Muntean	Vice President, General Mgr, Household/Grocery Div.
Allan R. Linderman	Vice President, Advertising Services
Janice J. Miller	Vice President, Market Research
Raymond A. Maslanka	Vice President, Operations
Doug Meneely	Vice President, Human Resources
Richard N. Paulsen	Vice President, Information Services
Leah M. Seidenfeld	Vice President, Marketing, Toiletries Division
Daniel B. Stone	Vice President, Communications

BOARD OF DIRECTORS OF ALBERTO-CULVER U.S.A., INC.

Leonard H. Lavin
Bernice E. Lavin
Howard B. Bernick

THE ADDRESS FOR ALL OF THE ABOVE OFFICERS AND DIRECTORS IS:

2525 Armitage Avenue, Melrose Park, IL 60160

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

**CORPORATION
ANNUAL REPORT
1995**



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

APPROVED
FEB

RECEIVED
FEB 1 1995
TALLAHASSEE, FLORIDA

DOCUMENT # P31731 (3)
FLEETWOOD TRAVEL TRAILERS OF MARYLAND, INC.

Principal Place of Business
**3125 MYERS STREET
RIVERSIDE CA 92503-5527**

Mailing Address
**3125 MYERS ST. PO BOX 7638
ATTN: TAX DEPT
RIVERSIDE CA 92531-7638
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **11/09/1990** 3a. Date of Last Report **05/01/1994**
4. FEI Number **52-0892953** 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. This corporation has liability for intangible tax under S. 199(3)(b), Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business
21. Suite, Apt. # etc.
22. City & State
23. City & State
24. City & State
25. City & State
26. Mailing Address
27. Suite, Apt. # etc.
28. City & State
29. City & State
30. City & State

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.
84. City
85. Zip Code **FL**

11. Pursuant to the provisions of Sections 807.01(1) and 807.15(1)(b), Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office of 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 807.02(1)(b), Florida Statutes.

SIGNATURE

Signature of Registered Agent or Director of the Corporation (Print Name and Title)

12. OFFICERS AND DIRECTORS
NAME
STREET ADDRESS
CITY & STATE
NAME
STREET ADDRESS
CITY & STATE
NAME
STREET ADDRESS
CITY & STATE
NAME
STREET ADDRESS
CITY & STATE
NAME
STREET ADDRESS
CITY & STATE
NAME
STREET ADDRESS
CITY & STATE
NAME
STREET ADDRESS
CITY & STATE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12:
1. NAME ☐ Change ☐ Addition
2. NAME ☐ Change ☐ Addition
3. NAME ☐ Change ☐ Addition
4. NAME ☐ Change ☐ Addition
5. NAME ☐ Change ☐ Addition
6. NAME ☐ Change ☐ Addition
7. NAME ☐ Change ☐ Addition
8. NAME ☐ Change ☐ Addition
9. NAME ☐ Change ☐ Addition
10. NAME ☐ Change ☐ Addition
11. NAME ☐ Change ☐ Addition
12. NAME ☐ Change ☐ Addition
13. NAME ☐ Change ☐ Addition
14. NAME ☐ Change ☐ Addition
15. NAME ☐ Change ☐ Addition
16. NAME ☐ Change ☐ Addition
17. NAME ☐ Change ☐ Addition
18. NAME ☐ Change ☐ Addition
19. NAME ☐ Change ☐ Addition
20. NAME ☐ Change ☐ Addition
21. NAME ☐ Change ☐ Addition
22. NAME ☐ Change ☐ Addition
23. NAME ☐ Change ☐ Addition
24. NAME ☐ Change ☐ Addition
25. NAME ☐ Change ☐ Addition
26. NAME ☐ Change ☐ Addition
27. NAME ☐ Change ☐ Addition
28. NAME ☐ Change ☐ Addition
29. NAME ☐ Change ☐ Addition
30. NAME ☐ Change ☐ Addition
31. NAME ☐ Change ☐ Addition
32. NAME ☐ Change ☐ Addition
33. NAME ☐ Change ☐ Addition
34. NAME ☐ Change ☐ Addition
35. NAME ☐ Change ☐ Addition
36. NAME ☐ Change ☐ Addition
37. NAME ☐ Change ☐ Addition
38. NAME ☐ Change ☐ Addition
39. NAME ☐ Change ☐ Addition
40. NAME ☐ Change ☐ Addition
41. NAME ☐ Change ☐ Addition
42. NAME ☐ Change ☐ Addition
43. NAME ☐ Change ☐ Addition
44. NAME ☐ Change ☐ Addition
45. NAME ☐ Change ☐ Addition
46. NAME ☐ Change ☐ Addition
47. NAME ☐ Change ☐ Addition
48. NAME ☐ Change ☐ Addition
49. NAME ☐ Change ☐ Addition
50. NAME ☐ Change ☐ Addition
51. NAME ☐ Change ☐ Addition
52. NAME ☐ Change ☐ Addition
53. NAME ☐ Change ☐ Addition
54. NAME ☐ Change ☐ Addition
55. NAME ☐ Change ☐ Addition
56. NAME ☐ Change ☐ Addition
57. NAME ☐ Change ☐ Addition
58. NAME ☐ Change ☐ Addition
59. NAME ☐ Change ☐ Addition
60. NAME ☐ Change ☐ Addition
61. NAME ☐ Change ☐ Addition
62. NAME ☐ Change ☐ Addition
63. NAME ☐ Change ☐ Addition
64. NAME ☐ Change ☐ Addition
65. NAME ☐ Change ☐ Addition
66. NAME ☐ Change ☐ Addition
67. NAME ☐ Change ☐ Addition
68. NAME ☐ Change ☐ Addition
69. NAME ☐ Change ☐ Addition
70. NAME ☐ Change ☐ Addition
71. NAME ☐ Change ☐ Addition
72. NAME ☐ Change ☐ Addition
73. NAME ☐ Change ☐ Addition
74. NAME ☐ Change ☐ Addition
75. NAME ☐ Change ☐ Addition
76. NAME ☐ Change ☐ Addition
77. NAME ☐ Change ☐ Addition
78. NAME ☐ Change ☐ Addition
79. NAME ☐ Change ☐ Addition
80. NAME ☐ Change ☐ Addition
81. NAME ☐ Change ☐ Addition
82. NAME ☐ Change ☐ Addition
83. NAME ☐ Change ☐ Addition
84. NAME ☐ Change ☐ Addition
85. NAME ☐ Change ☐ Addition
86. NAME ☐ Change ☐ Addition
87. NAME ☐ Change ☐ Addition
88. NAME ☐ Change ☐ Addition
89. NAME ☐ Change ☐ Addition
90. NAME ☐ Change ☐ Addition
91. NAME ☐ Change ☐ Addition
92. NAME ☐ Change ☐ Addition
93. NAME ☐ Change ☐ Addition
94. NAME ☐ Change ☐ Addition
95. NAME ☐ Change ☐ Addition
96. NAME ☐ Change ☐ Addition
97. NAME ☐ Change ☐ Addition
98. NAME ☐ Change ☐ Addition
99. NAME ☐ Change ☐ Addition
100. NAME ☐ Change ☐ Addition

14. I do hereby certify that the information submitted with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 191.01(1)(b), Florida Statutes. I further certify that the information submitted 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 owner or holder of a power of attorney to execute this report as required by Chapter 191, Florida Statutes, and that my name appears on the stock or books of the corporation or on any other document with an address.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LYLE N LARKIN

4-10-95

909/351-3797

031731

FLEETWOOD TRAVEL TRAILERS OF MARYLAND, INC.
Officers and Directors

JOHN C. CREAN	CHAIRMAN OF THE BOARD AND CHIEF EXECUTIVE OFFICER
WILLIAM W. WEIDE	VICE CHAIRMAN OF THE BOARD
DALE T. SKINNER	DIRECTOR
GLENN F. KUMMER	PRESIDENT, CHIEF OPERATING OFFICER AND DIRECTOR
PAUL M. BINGHAM	FINANCIAL VICE PRESIDENT & ASST. SECY.
JON A. NORD	SENIOR VICE PRESIDENT - HOUSING GROUP
ELDEN L. SMITH	SENIOR VICE PRESIDENT - RV GROUP
LAWRENCE F. PITTROFF	SENIOR VICE PRESIDENT
WILLIAM H. LEAR	VICE PRESIDENT - GENERAL COUNSEL AND SECRETARY
ROBERT W. GRAHAM	VICE PRESIDENT - ADMINISTRATION AND HUMAN RESOURCES
JERRY L. HEWITT	VICE PRESIDENT - QUALITY
LARRY J. HUGHES	VICE PRESIDENT - TRAVEL TRAILER DIVISION
LYLE N. LARKIN	TREASURER AND ASSISTANT SECRETARY

ALL CORRESPONDENCE TO ANY OF THE
ABOVE SHOULD BE ADDRESSED AS FOLLOWS:
3125 Myers Street
P.O. BOX 7638
RIVERSIDE, CA 92513-7638