Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90098 027 \*\*\*150.00

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

#### **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

# DOCUMENT # P9600056909

1. Corporation Name

CNA UNI	SOURCE OF FLORIDA, INC	•					
Principal Place	of Business	Mailing Address				il ABIBI BILLA ALLIA IBILLA	JII 9 ( E 1) ( E E I
CNA PLAZA 21S.							
CHICAGO IL 60685 CHICAGO IL 60685					DO MOTIVIDITE IN THIS OPACE		
				DO NOT WRITE IN THIS SPACE		<del></del>	
					3. Date Incorporated or Qualifed		Ì
					07/02/1996		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		olied For
21 26					65-0685111		Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	\$8.75 A	L
22 27							·
City & State City & State					6. Election Campaign Financing	\$5.00 r Added to	- 1
23	0-11-4-1	Zip	Country		Trust Fund Contribution		71 663
Zip			- ·		<ol><li>This corporation owes the current y Personal Property Tax.</li></ol>		□No
24	9. Name and Address of Current		<u> </u>		10. Name and Address of New Regis		
	9. Name and Address of Current	. Kadistelen Affelik	81	Name	To. Hame and the second of the		
CT	CORPORATION SYSTEM		<u>_</u>			<del></del> -	
1200 SOUTH PINE ISLAND ROAD			82	82 Street Address (P.O. Box Number is Not Acceptable)			
PLANTATION FL 33324			83	<b>-</b>	,		
				L			
			84	City		FL 85 Zip C	ode
Could be a second of the Charles the plant of the property of the purpose of changing its registered							
11. Pursuant to the provisions of Sections 607.1502 and 607.1508, Florida Statutes, the above-flamed corporation such interest and the purpose of classified of the corporation 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							
			egistered Age	nt signature r	equired when reinstating)  ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 12
12.	OFFICERS AN	D DIRECTORS DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICE	Change	Addition
TITLE						٠	_
NAME			1.2 NAME	T +DDDECO			
STREET ADDRESS	• • • • • • • • • • • • • • • • • • • •			T ADDRESS			ļ
CITY-ST-ZIP	CHICAGO IL 60685	☐ DELETE	1.4 CITY-S	i-ZIP	CEO/D	[] Change	Addition
TITLE	PD	TÃ DEFETE	2.1 TITLE		CEO/P   Najeeb A. Khan		•ж
NAME	KOOKEN, MICHAEL W				CNA Plaza		
STREET ADDRESS	CNA PLAZA,		1				ļ
CITY-ST-ZIP	CHICAGO IL 60685	☐ DELETE	2. 4 CITY-5	ST-ZIP	Chicago, IL 60685	[] Change	Addition
TITLE	SV	C) DELETE	3.1 TITLE				
NAME	CACCHIONE, DANIEL A		3.2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP	CHICAGO IL 60685	₩ DELETE	3.4. CITY-5	ST-ZIP		Change	Addition
ΠLE	SV	€ŽI DELETE	4.1 TITLE		SV   William Shroyer	الماري ري	X
NAME	HALLAGAN, DONALD J CFO		4, 2 NAME				
STREET ADDRESS	CNA PLAZA,			TADDRESS	CNA Plaza		
CITY-ST-ZIP	CHICAGO IL 60685	EI DELETE	4.4 CITY-5	IT-ZIP	Chicago, IL 60685	Change	Addition
TITLE	GVC	<b>⊠</b> DELETE	5.1 TITLE 5.2 NAME		V   Lawrence J. Boysen	□ ouguge	ZZI / NOSINOII
NAME	KUBERA, PATRICIA L			エ ムロロウビビウ	CNA Plaza		_
STREET ADDRESS	CNA PLAZA,		1	T ADDRESS			
CITY-ST-ZIP	011107100 12 00000		5.4 CITY-5 6.1 TITLE	11-AP	Chicago, IL 60685	Change	☐ Addition
TITLE	GVS HOLIDIHAN PALILE	<b>反</b> OELETE	6.2 NAME		V/T Pamela S. Demnsey	□ oumide	Addition
MARKE	, en a Barrary Pulli P		= U.L IVWE		ilovela a. DPONSPV		2.

14. 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 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, with all other like empowered.

6.3 STREET ADDRESS

CNA Plaza

SIGNATURE: 0

STREET ADDRESS CITY-ST-ZIP

CNA PLAZA,

Boysen

312-822-5653

### CNA UNISOURCE, Inc.

298383-90098-27 P96000056909

#### Officers

Chairman of the Board Chief Executive Officer &

President

Senior Vice President - Marketing

Senior Vice President & Chief

Financial Officer

Senior Vice President,

General Counsel

& Secretary
Senior Vice President
Senior Vice President
Senior Vice President
Group Vice President

Vice President & Treasurer

Vice President Assistant Secretary

**Assistant Secretary** 

Michael S. McGavick

Najeeb A. Khan

Daniel A. Cacchione

Milind Agtey

Enid Tanenhaus William Shroyer A. Robert O'Bien Zaven Kazazian John Sullivan

Pamela S. Dempsey Lawrence J. Boysen

Robert Grob

Mary A. Ribikawskis

#### **Directors**

Paul Hourihan Michael S. McGavick David T. Cumming Najeeb A. Khan

8/98

ALL LOCATED AT: CNA PLAZA CHICAGO, ILLINOIS 60685