

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

1 of 3

DOCUMENT # 818475 (6)

1. Corporation Name
KAWNEER COMPANY, INC.



Principal Place of Business: 555 GUTHRIDGE COURT NORCROSS GA 30092
Mailing Address: 5655 PEACHTREE PKWY NORCROSS GA 30092 US

3. Date Incorporated or Qualified: 02/03/1965
3a. Date of Last Report: 04/20/1995

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

4. FEI Number: 38-1753729
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. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
8751 WEST BROWARD BOULEVARD
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: FL

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: _____ DATE: _____
Signature, typed or printed name of registered agent and start date (if applicable) (NOTE: Registered Agent signature required when renewing filing)

12. OFFICERS AND DIRECTORS		
TITLE	P	<input type="checkbox"/> DELETE
NAME	GOODE, DENNY P	
STREET ADDRESS	555 GUTHRIDGE COURT	
CITY - ST - ZIP	NORCROSS GA	
TITLE	CD	<input type="checkbox"/> DELETE
NAME	LA LONDE, D. H.	
STREET ADDRESS	555 GUTHRIDGE COURT	
CITY - ST - ZIP	NORCROSS GA	
TITLE	V	<input type="checkbox"/> DELETE
NAME	VOREIS, D	
STREET ADDRESS	555 GUTHRIDGE COURT	
CITY - ST - ZIP	NORCROSS GA	
TITLE	V	<input type="checkbox"/> DELETE
NAME	JOGLEKAR, DILIP	
STREET ADDRESS	555 GUTHRIDGE COURT	
CITY - ST - ZIP	NORCROSS GA	
TITLE	AS	<input checked="" type="checkbox"/> DELETE
NAME	MYLES, M.W.	
STREET ADDRESS	555 GUTHRIDGE COURT	
CITY - ST - ZIP	NORCROSS GA	
TITLE	V	<input type="checkbox"/> DELETE
NAME	BESKE, A	
STREET ADDRESS	555 GUTHRIDGE COURT	
CITY - ST - ZIP	NORCROSS GA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE	AS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	CREBS, M.	
5.3 STREET ADDRESS	555 GUTHRIDGE COURT	
5.4 CITY - ST - ZIP	NORCROSS, GA 30092	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

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: GARY D. FOSTER, V.P. 4/17/96 (770) 246-6600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day, Month, Year Phone #

CR2E034 (12/95)

KAWNEER COMPANY, INC.
FEI # 38-1753729

OFFICERS

Dale H. LaLonde, Chariman of the Board
Denny P. Goode, President
Alan G. Beske, Vice President
Helen M. Feeney, Vice President & Secretary
Gary D. Foster, Vice President
Dilip Joglekar, Vice President
Kevin J. Krakora, Vice President - Finance, Treasurer,
and Assistant Secretary
R. D. Voreis, Vice President
R. P. Wolf, Vice President
Michael W. Borkowski, Assistant Secretary
Myles Crebs, Controller & Assistant Secretary
Marc H. Crown, Assistant Treasurer

DIRECTORS

Helen M. Feeney
Dale H. LaLonde
Michael T. Vollkommer

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