

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

**FILED**  
**Feb 10 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

**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 30092-2812 US**

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)

3. Date Incorporated or Qualified: **02/03/1965**  
 3a. Date of Last Report: **04/23/1996**  
 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

g. 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 **FL** 85 Zip Code

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 title if applicable (NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>P</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>GOODE, DENNY P</b>	1.2 NAME	
STREET ADDRESS	<b>555 GUTHRIDGE COURT</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>NORCROSS GA</b>	1.4 CITY-ST-ZIP	
TITLE	<b>CD</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>LA LONDE, D. H.</b>	2.2 NAME	
STREET ADDRESS	<b>555 GUTHRIDGE COURT</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>NORCROSS GA</b>	2.4 CITY-ST-ZIP	
TITLE	<b>V</b>	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>VOREIS, D</b>	3.2 NAME	
STREET ADDRESS	<b>555 GUTHRIDGE COURT</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>NORCROSS GA</b>	3.4 CITY-ST-ZIP	
TITLE	<b>V</b>	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>JOGLEKAR, DILIP</b>	4.2 NAME	
STREET ADDRESS	<b>555 GUTHRIDGE COURT</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>NORCROSS GA</b>	4.4 CITY-ST-ZIP	
TITLE	<b>AS</b>	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>CREBS, M</b>	5.2 NAME	
STREET ADDRESS	<b>555 GUTHRIE CT</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP	<b>NORCROSS GA</b>	5.4 CITY-ST-ZIP	
TITLE	<b>V</b>	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BESKE, A</b>	6.2 NAME	
STREET ADDRESS	<b>555 GUTHRIDGE COURT</b>	6.3 STREET ADDRESS	
CITY-ST-ZIP	<b>NORCROSS GA</b>	6.4 CITY-ST-ZIP	

14. I do 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.

SIGNATURE: *Gary D. Foster* **GARY D. FOSTER, V.P. 2-4-97 770/246-6600**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)

**KAWNEER COMPANY, INC.**  
**FEI # 38-1753729**

OFFICERS

Denny P. Goode, President  
Alan G. Beske, Vice President  
Helen M. Feeney, Vice President & Secretary  
Gary D. Foster, Vice President  
Lawrence B. Frost, 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  
Carla Brown, Assistant Secretary  
Marc H. Crown, Assistant Treasurer

DIRECTORS

Helen M. Feeney

Address: 5655 Peachtree Parkway  
Norcross, Georgia 30092-2812