

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 849021

(1)

1. Corporation Name

KAMMINGA & ROODVOETS, INC.



Principal Place of Business

3435 BROADMOOR, S.E.  
GRAND RAPIDS MI 49512

Mailing Address

3435 BROADMOOR, S.E.  
GRAND RAPIDS MI 49512

3. Date Incorporated or Qualified  
05/04/1981

3a. Date of Last Report  
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TIDEY, MARCUS B  
5501 DOWNING RD  
PLANT CITY, FL  
33566

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

DATE

12. OFFICERS AND DIRECTORS

TITLE V ☐ DELETE

NAME TIDEY, MARCUS  
STREET ADDRESS 5501 DOWNING ROAD  
CITY- ST- ZIP PLANT CITY FL

TITLE PD ☐ DELETE

NAME STEIGENGA, RICHARD  
STREET ADDRESS 411-92ND STREET SE.  
CITY- ST- ZIP BYRON CENTER MI

TITLE CD ☐ DELETE

NAME VAN POPERING, ALLAN  
STREET ADDRESS 7350 BROOKLYN SE.  
CITY- ST- ZIP GRAND RAPIDS MI

TITLE VD ☐ DELETE

NAME WORKMAN, CARL  
STREET ADDRESS 3650 - 84TH STREET, S.E.  
CITY- ST- ZIP CALEDONIA, MI 00000

TITLE STD ☐ DELETE

NAME KLYNSTA, KRAIG  
STREET ADDRESS 1921 THORNAPPLE SE  
CITY- ST- ZIP GRAND RAPIDS MI

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
KRAIG I. KLYNSTA SECRETARY/TREASURER

Date

Daytime Phone #

4/19/96

616-949-0800

CR2E034 (12/95)