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FILED
May 13 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 # 849021
1. Corporation Name

(1)

KAMMINGA & ROODVOETS, INC.



Principal Place of Business

Mailing Address

3435 BROADMOOR . S.E.
GRAND RAPIDS MI 49512

3435 BROADMOOR . S.E.
GRAND RAPIDS MI 49512-2870

3. Date Incorporated or Qualified

05/04/1981

3a. Date of Last Report

04/29/1996

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

25

29

30

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE V ☐ DELETE

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

1.1 TITLE ☐ Change ☐ Addition

TITLE PD ☐ DELETE

NAME STEIGENGA, RICHARD
STREET ADDRESS 411-82ND STREET SE.
CITY-ST-ZIP BYRON CENTER MI

1.2 NAME ☐ Change ☐ Addition

TITLE CD ☐ DELETE

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

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE VD ☐ DELETE

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

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE STD ☐ DELETE

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

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

2.2 NAME ☐ Change ☐ Addition

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 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

SIGNATURE REQUIRED

4/30/97

(166) 949-0800

CR2E034 (9/96)