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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9400003747 (2)

THE COLEMAN COMPANY, INC.

Principal Place	e of Business	Mailing Address							
3600 N. HYDRA		1526 COLE BLVD.							
C/O TAX DEPT		SUITE 300 GOLDEN CO 80401-3410							
WICHITA KS 67219 US		US				3. Date Incorporated or Qualified	3. Date Incorporated or Qualified 3a. Date of Last		
						07/18/1994			
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number	1 7-7-		plied For
21		26 1767 Denve	r W	est	· Bluc	13-3639257		No	t Applicable
Suite, Apr	# etc	Suite, Apt. #, etc.						\$8.75	Additional
22		27 P. O. Box	409	1		5. Certificate of Status Desired		Fee Re	quired
City & State	(!	City & State				6. Election Campaign Financing		\$5.00	May Be
:3		28 Golden, CC) (4)			Trust Fund Contribution		Added t	
Zip	Country	Zip		Country		8. This corporation has liability for in			199.032,
4 25 29 80401			30 USA			Florida Statutes Yes No			
	9. Name and Address of Current	Registered Agent		ļ,		10. Name and Address of New Reg	jistered A	rgent	
CT	CORPORATION SYSTEM			81	Name				
1200	O SOUTH PINE ISLAND ROAD				Street Add	Street Address (P.O. Box Number is Not Acceptable)			
	NTATION FL 33324		82	0000000	1 Fraction of Free Box Fraction in Tractional Region				
				83					
				0.4	0			les l 7m /	
				84	City		FL	85 Zip (Code
11. Pursuant	to the provisions of Sections 607.0502	and 607 1508. Florida Statut	es. the	above	-named co	rporation submits this statement for the p		changing it	s registered
office or r	egistered agent, or both, in the State of	ot Florida. Such change was a	authoriz	red by	the corpora	ation's board of directors. I hereby accep	it the appo	ointment as	registered
agent La	m familiar with, and accept the obliga-	nons or, section 607.0505, Fi	orida Si	autes	,				
SIGNATURE	Signature type this printed name of depretentil high-	ana title d'ampletacu (NOT	E Éleoiste	red Age	nt signature regi	ured when reinstating)	DATE		
12.	OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	IS IN 12
TITLE	CEOC	DELETE		11 TITLE CE		CEO/C/D		Change	Addition
NAME	HAMMES, MICHAEL N		1.2	NAME		, -, -			~-
STREET ADORESS	1526 COLE BLVD., SUITE 300				ADDRESS 1	767 Danier West Di			
CITY ST ZIF	GOLDEN CO			I I /		1767 Denver West Bl Golden, CO 80401	LVQ.		
THE	EVCF					EVP		Change	Addition
NAME	MILEUSNIC, GEORGE		22	NAME] "	641		**	
SUREFU ADDRESS	1526 COLE BLVD., SUITE 300				ADDRESS :	3600 N. Hydraulic			
	GOLDEN CO			4 CITY - S					
CHY-SI ZIP THE	SRV	X DELETE		TITLE	51. TiL	Wichita, KS 67219 EVP/CFO		Change	X Addition
NAME	OGDEN, CHARLES A	-Verrein	- 1	NAME		Steven F. Kaplan			
	P O BOX 1762 N/A					1767 Denver West B	1 ഗർ		
STREET ADDRESS	WICHITA KS					Golden, CO 80401	ıvu.		
CITY - \$1 - ZIP THILE	EVS	DELETE	_	I. CHTY - S	or-Zit.	301dell, CO 00401		Change	Addition
	SANFORD, LARRY E	La Dickit						- Sittingo	
NAME OFFICE LEGISLAGE	ACON COLE BLUD CHITE ACO			2 NAME	*DDDCCC	1767 Dominar Wast D	ت٦		
STREET ADDRESS	GOLDEN CO					1767 Denver West B	rva.		
CITY - ST - ZIP		DELETE	_	CITY-S	1-ZIP [(Golden, CO 80401		X Change	Addition
TITLE	EV DAIG DAIAD K	ר"ו מנונונ		TITLE				PT Anguille	LL ADDITION
NAME	STEARNS, DAVID K			NAME			_		
STREET ADDRESS	1526 COLE BLVD., SUITE 300				I	1767 Denver West B	lvd.		
CHTY+ST ZIP	GOLDEN CO			5 4 CITY-ST-ZIP GC		Golden, CO 80401		Change	Addition
THLE	SRV	☐ DELETE		TITLE				change	L. Addition
NAME	HAWES, MICHAEL S SR		1	? NAME		14740 Wase Com	D	a	
STREET ADDRESS	P.O. BOX 1762 N/A					4748 West Center Road, Suite 202			
C:TY-S"-7IP	WICHITA KS	<u> </u>	6.4	4 CITY-S	T-21P	Omaha, NE 68144			
14. Edo bere information	by certify that the information supplied on indicated on this aimulal report or si	r wan this tiling does not qual uppl emen tal appual report is	ny for th true and	ne exe diacci	emption stati urate and th	ed in Section 119.07(3)(i), Florida Statute lat my signature shall have the same lega lort as required by Chapter 607, Florida S	s. i turtner il effect as	certify that if made un	ਗe ider oath; tha
Lam an c	officer or director of the corporation of	ye receiyer ir trustee empov	vered to	o exec	ute this rep	ort as required by Chapter 607, Florida S	itatutes; a	nd that my r	name
appears	in Block 12 or Block 13 Fichanged, or	xx an anaghmentwith an ad	uress						

SIGNATURE:

Larry E. Sanford 01/13/97 303-202-2498

FILED

Jan 27 1997 8:00am

Secretary of State