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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 591660

(6)

BAND SAW BLADES, INC.

Principal Place of Business

Mailing Address

FILED May 06 1997 8:00am Secretary of State



Suite, Apt. #, etc. 22 City & State City & State Zip Country Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation has hability for intangible tax under s. 199 032,	\$11 NE 9TH ST OCALA FL 34470		311 NE 9TH ST OCALA FL 34470-5240					
Surple April 4 etc. Surple April 4 etc. Surple April 4 etc.						10/30/1978		Report
Support Country 27 27 27 27 27 27 28 28	2. Principal Pl	ace of Business	2e. Mailing Address					
27	21					59-1855757		
2D Country Addition From Country Addition From Country Addition From Statement Fr	Suite, Apt. #, etc.							
Zip Country Zip Sip				- -1 '		1		
28				ntry				
BOWMAN, THEODORE J. 311 NE 9TH ST. OCALA FL 32670 82 Stroot Address (P.O. Box Number is Not Acceptable) 11. Pursuent to the provisions of Sections 607.05.02 and 607.15.08. Excide Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and the provisions of Sections 607.05.05. Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and eccept the obligations of, Section 607.05.05. Floridal Statutes, the above-named corporation is board of directors. I hereby accept the appointment as registered agent. I am familiar with, and eccept the obligations of, Section 607.05.05. Floridal Statutes (Statutes) 12. Of TI JCE INS AND DIFFE CTORS 13. ADDITIONS(CHANGES TO OFFICE AND DIFFE CTORS IN 12. 17. ITHE 12. OF TI JCE INS AND DIFFE CTORS 14. STREET ADDRESS 244.0 NE 7TH ST. 15. CITY-ST-2P 10. DELTE 17. ITHE 17. ITHE	24	25 29 30		30		· · · · · · · · · · · · · · · · · · ·		
331 NE 97H ST. OCALA FL 32670 82 Street Address (F.O. Box Number is Not Acceptable) 83 Per of Address (F.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florids Statutos, the above named corporation submits this statement for the purpose of changing its registered agent. an affiliate with, end eccept the originative of Section (Or.O.COS. Florids Statutos, the above named corporation's board of directors. I hereby except the appointment as registered agent. and affiliate with end eccept the originative of Section (Or.O.COS. Florids Statutos). SIGNATURE 12. OF IT ICE IS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OF IT ICE IS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. STREET ADDRESS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. STREET ADDRESS 17. STATE IS ADDRESS TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. Addition 19. DETTILE 10 CALA, FL 00000 10. DETTILE 2 IN 12 10. DOLLA, FL 00000 11. STATE IS ADDRESS 12. STREET ADDRESS 12. STREET ADDRESS 12. STREET ADDRESS 12. STREET ADDRESS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. STREET ADDRESS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 15. STREET ADDRESS 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. STREET ADDRESS 17. STATE TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10. ADDITIONS/CHANGES		g. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	gistered Agent	
CALA FL 32870	BOW	MAN, THEODORE J.		ŀ	81 Name			
11. Pursuant to the provisions of Sections 607 0.002 and 607 1.002 and 607 0.002 and 607 0.003 and 6				}	82 Street A	ddress (P.O. Box Number is Not Acceptab	ole)	
### City ### FL 55 Zip Code 11. Pursuant to the provisions of Sections 697.05.02 and 697.15.08. Florida Statutos, the above named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Forida's Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or hard accept the objection 697.05.05 florida Statutos. **SIGNATURE** **Bignature** Type of the provisions of Sections 697.05.02 and for the purpose of changing its registered agent. I am familiar with, and accept the objection 697.05.05.05 florida Statutos. **SIGNATURE** **Bignature** Type of the provisions of Sections 697.05.02 and familiar international purpose of prices and accept the objection of Sections 12 of Triceris and Directors. **TITLE** OF FIGERS AND DIRECTORS IN 12 **TITLE** DEBUTE** DIRECTORS IN 12 **TITLE** DEBUTE** DIRECTORS IN 12 **SIRET ADDRESS** DIVISIONAL PROVIDED BAMES** DIRECTORS IN 12 **STRET ADDRESS** DIVISIONAL PROVIDED BAMES** DIRECTORS IN 12 **STRET ADDRESS** DIVISIONAL PROVIDED BAMES** DIRECTORS IN 12 **STRET ADDRESS** DIVISIONAL PROVIDED BAMES** DIVIS	UCA	LA FL 32670		. }	83			
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 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, 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, and accept the obligations of Social 607.0505, Florida Statutes. Signature in the provisions of Social 607.0506 Florida Statutes								
Signature Signature typed or printed more of rog dated agent and line if a justicable (NOTI Tregistered Agent agentare topined where remaining) DATE					84 City		FL 85 Zip	o Code
Signature Signature typed or printed more of rog dated agent and line if a justicable (NOTI Tregistered Agent agentare topined where remaining) DATE	11. Pursuant office or repent. La	to the provisions of Sections 607.050 egistered agent, or both, in the State of familiar with, and accept the oblig	02 and 607.1508. Florida Statute of Florida Such change was pations of, Section 607.0505, Fl	tos, the at authorized orida State	pove-named of the corporates.	corporation submits this statement for the poration's board of directors. I hereby accep	orpose of changing of the appointment a	its registered is registered
12.	SIGNATURE							
TITLE D	Signature, typed or printed name of registured agent and title if applicable. (NOTE: Re				Agent signature re			
NAME BOWMAN, THEODORE JAMES 12 MAME 1.3 STREET ADDRESS 2440 NE 7TH ST. 1.3 STREET ADDRESS 1.4 CHY-ST-ZP COCALA, FL 00000 2.2 MAME STREET ADDRESS 22 MAME COCALA, FL 00000 2.4 CHY-ST-ZP COCALA, FL 000000 2.4 CHY-ST-ZP COCALA, FL 00000 2.4 CHY-ST-ZP COCALA, FL 000000 2.4 CHY-ST-ZP COCALA, FL 00000 2.4 CHY-ST-ZP COCALA, FL 000000 2.4 CHY-ST					IF T	ADDITIONS/CHANGES TO OFFICE		
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TITLE	STREET ADDRESS			23STHEET ADDRESS				
NAME DONIE, ANN M. 32 NAME 33 STREET ADDRESS 3207 NW 104TH TERR 33 STREET ADDRESS SUNRISE FL 34,0117-S1-ZIP TITLE D								
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NAME BOWMAN, THEODORE JAY 1106 JEFFERSON ST. 4.3 STREET ADDRESS 5/11/- ST-ZIP BEARDSTOWN IL 4.4 (CITY- ST-ZIP 5.1 NITLE Change Addition Additio			☐ DECETE				Change	Addition
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14. I do hereby certify that the information supplied with this filling 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, on an attachment with an address.

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