


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

**FILED**  
**Apr 09 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 806015 (4)**

1. Corporation Name  
**GERBER PRODUCTS COMPANY**



Principal Place of Business <b>445 STATE STREET                  FREMONT MICHIGAN 49412</b>	Mailing Address <b>445 STATE STREET                  FREMONT MICHIGAN 49412</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	22 City & State	27 City & State
23 Zip	25 Country	28 Zip	30 Country

3. Date Incorporated or Qualified <b>11/24/1945</b>	
4. FEI Number <b>38-0558270</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM  
 1200 S. PINE ISLAND ROAD  
 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	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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>CORRADO, JOHN</b>	1.2 NAME	<b>See List Attached</b>
STREET ADDRESS	<b>445 STATE STREET</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>FREMONT MI</b>	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	
NAME	<b>PIERGALLINI, ALFRED A</b>	2.2 NAME	<b>See List Attached</b>
STREET ADDRESS	<b>445 STATE STREET</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>FREMONT MI</b>	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	
NAME	<b>JETZER, ALEXANDER F</b>	3.2 NAME	<b>See List Attached</b>
STREET ADDRESS	<b>LICHSTRASSE 35, CH-4002</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>BASLE SW</b>	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	
NAME	<b>VPGS JAMES, JOHN J.</b>	4.2 NAME	<b>See List Attached</b>
STREET ADDRESS	<b>445 STATE STREET</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>FREMONT MI</b>	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME	<b>CORRADO, JOHN</b>	5.2 NAME	<b>See List Attached</b>
STREET ADDRESS	<b>445 STATE STREET</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP	<b>FREMONT MI</b>	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME	<b>BREU, RAYMUND DR.</b>	6.2 NAME	<b>See List Attached</b>
STREET ADDRESS	<b>LICHSTRASSE 35</b>	6.3 STREET ADDRESS	
CITY-ST-ZIP	<b>CH-4002 BASLE SW</b>	6.4 CITY-ST-ZIP	

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CITY-ST-ZIP	<b>CH-4002 BASLE SW</b>	6.4 CITY-ST-ZIP	

14. I 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: *John Corrado* Treasurer 4-1-98 616-928-2848

CR2E034 (10/97)

**GERBER PRODUCTS COMPANY**  
**Fremont, Michigan**

**DIRECTORS**

<u>NAME</u>	<u>ADDRESS</u>
Alfred A. Piergallini	445 State Street, Fremont, MI 49413
Dr. Raymund Breu	Lichstrasse 35, CH-4002 Basle, Switzerland
Douglas Watson	556 Morris Avenue, Summit, NJ 07901
Alexander F. Jetzer	Lichstrasse 35, CH-4002 Basle, Switzerland

**OFFICERS**

<u>TITLE</u>	<u>NAME</u>	<u>ADDRESS</u>
Chairman of the Board	Alexander F. Jetzer	Lichstrasse 35, CH-4002 Basle, Switzerland
Vice Chairman of the Board, President & CEO	Alfred A. Piergallini	445 State Street Fremont, MI 49413
Sr. VP & Chief Financial Officer	Kurt Furger	445 State Street Fremont, MI 49413
Vice President, General Counsel & Secretary	John J. James	445 State Street Fremont, MI 49413
Vice President/CFO - U.S. Operations	Stan M. Vander Roest	445 State Street Fremont, MI 49413
Treasurer	John Corrado	445 State Street Fremont, MI 49413