

**FILE NOW: FILING FEE AFTER MAY 1 IS \$25.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **827710** (5)

1. Corporation Name  
**LOREN COOK COMPANY**



Principal Place of Business: 2015 E. DALE STREET, P. O. BOX 4047 GS, SPRINGFIELD MO 65808  
Mailing Address: 2015 E. DALE STREET, P. O. BOX 4047 GS, SPRINGFIELD MO 65808

3. Date Incorporated or Qualified <b>03/28/1972</b>	3a. Date of Last Report <b>01/31/1995</b>
4. FEI Number <b>34-0673236</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 has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 State, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 State, Apt. #, etc. 27 City & State 28 Zip 29 Country
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**9. Name and Address of Current Registered Agent**

**10. Name and Address of New Registered Agent**

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

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 607.1506, 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: \_\_\_\_\_ DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CPT	1. TITLE	(address changes only) <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COOK, GERALD	12. NAME	
STREET ADDRESS	2851 CANYON DR	13. STREET ADDRESS	5632 S. CASTLEBAY
CITY-STATE-ZIP	SPRINGFIELD MO	14. CITY-STATE-ZIP	SPRINGFIELD MO
TITLE	V	2. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PETERS, JACK	22. NAME	
STREET ADDRESS	4141 E. WHITEHALL	23. STREET ADDRESS	
CITY-STATE-ZIP	SPRINGFIELD MO	24. CITY-STATE-ZIP	
TITLE	V	3. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COLWELL, VICTOR C.	32. NAME	
STREET ADDRESS	2338 E. CAMBRIDGE	33. STREET ADDRESS	
CITY-STATE-ZIP	SPRINGFIELD MO	34. CITY-STATE-ZIP	
TITLE	SD	4. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COOK, KAY LYNN	42. NAME	
STREET ADDRESS	2851 CANYON DR	43. STREET ADDRESS	5632 S. CASTLEBAY
CITY-STATE-ZIP	SPRINGFIELD MO	44. CITY-STATE-ZIP	SPRINGFIELD MO
TITLE	VSD	5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BURNEY, STEVE.	52. NAME	
STREET ADDRESS	ROUTE 1, BOX 607-6	53. STREET ADDRESS	6453 N CRYSTAL VALLEY LN.
CITY-STATE-ZIP	SPRINGFIELD MO	54. CITY-STATE-ZIP	SPRINGFIELD MO
TITLE	T	6. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COOK, PAULA	62. NAME	
STREET ADDRESS	2107 E. MIMOSA	63. STREET ADDRESS	4151 E. CRIGHTON
CITY-STATE-ZIP	SPRINGFIELD MO	64. CITY-STATE-ZIP	SPRINGFIELD MO

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: *Steve Burney*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)