


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 19, 2006 8:00 am**  
**Secretary of State**

06-19-2006 90001 002 \*\*\*150.00

<b>DOCUMENT # 842701</b>					
1. Entity Name <b>CARDINAL SCALE MANUFACTURING COMPANY</b>					
Principal Place of Business <b>203 E DAUGHERTY P.O. BOX 151 WEBB CITY, MO 64870</b>			Mailing Address <b>203 E DAUGHERTY P.O. BOX 151 WEBB CITY, MO 64870</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>44-0608372</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324</b>			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			<b>FL</b>		Zip Code
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD PERRY, WILLIAM H JR 7 COLONIAL DR WEBB CITY, MO	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD PERRY, MARION E 7 COLONIAL DR WEBB CITY, MO	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PERRY, DAVID H. RT 1 WEBB CITY, MO	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY WILLIAM H. PERRY, III 1202 BRAMAR JOPLIN, MO 64801	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER REBECCA JANE PERRY 25 COLONIAL DRIVE WEBB CITY, MO 64870	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	



05152006 Chg-P CR2E034 (11/05)

Applied For  
Not Applicable

**FL**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *William H. Perry*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/19/06

417-673-4651

Date Daytime Phone #

# ATTACHMENT

ROBERT J. BAKER, CPA (1921-2004)  
CHARLES L. DAVIS, CPA  
WILLIAM F. RODERIQUE, CPA  
BILLY G. FELLERS, CPA, MBA  
BRAD S. BAKER, CPA, MBA  
VICKI L. ELLIFF, CPA  
MARK LAMB, CPA, MBA  
A. JAY LOGAL, CPA, MCP

CERTIFIED PUBLIC ACCOUNTANTS

**BAKER DAVIS RODERIQUE**  
A PROFESSIONAL CORPORATION

40095999  
#842701

May 22, 2006

Florida Department of State  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500


Dear Sir:

Enclosed is the 2006 for Profit Corporation Annual Report and a check for \$150.00. We understand that the report is late but respectfully request that you waive the additional charge of \$400.00.

This has been a year of many transitions for Cardinal Scale Manufacturing Company. W.H. Perry, Jr., the founder, CEO and an integral part of the day to day operations and his wife Marion passed away this year. In addition, Howard Cozad, the comptroller, also passed away this year. Under normal circumstances, Cardinal has not been in the habit of making this payment late. Based upon Cardinal's past track record and the confusion due to the loss of so many key personnel we again request that you waive the additional charge of \$400.00.

Sincerely,

BAKER DAVIS RODERIQUE, CPAS, PC



Charlie Davis, CPA

cw

Enc: 2006 for Profit Corporation Annual Report