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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

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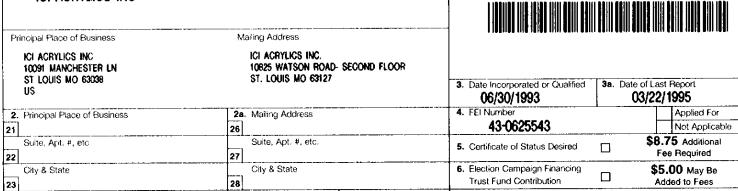
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ICI ACRYLICS INC.



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C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324

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Country

9. Name and Address of Current Registered Agent

untry	8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☑ No paid 3-96					
1	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 Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  DATE							
12.	OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITEF	ÇD ∑₹ DELETE	1, 1 TITLE	Chairman & CEO	🔀 Change	Addition		
NAME	DRECHSLER, PAUL J.	1.2 NAME	ROSS H. MC MILLAN				
STREET ADDRESS	CONCORD PIKE & NEW MURPHY ROAD	1.3 STREET ADDRESS	2665 FITE RD.				
CITY - ST - ZIP	WILMINGTON DE	1.4 CITY - ST - ZIP	MEMPHIS TN 38127				
TITLE	PD SE DELETE	2 1 TITLE		Change	☐ Addition		
NAME	WARD, RICHARD J	22 NAME	not replaced				
STREET ADDRESS	10091 MANCHESTER RD	2.3 STREET ADDRESS	-				
CiTY - ST - ZIP	ST LOUIS MO 63122	2.4 CITY - ST - ZIP			-		
THILE	\$ □ DELETE	3. 1 TITLE		☐ Change	Addition		
NAME	CURRAN, BARBARA \$	3 2 NAME					
STREET ADDRESS	CONCORD PIKE & NEW MURPHY ROAD	3 3 STREET ADDRESS					
CITY - \$1 - ZIP	WILMINGTON DE 19897	3.4 CITY-ST-ZIP		<b>53.</b> 0	To tare		
TITLE	<b>A</b> DEFEIE	4.1 TITLE	V	🔀 Change	☐ Addition		
NAME	BONNER, GRAHAM C	4.2 NAME	ANNIE S. VEERMAN				
STREET ADDRESS	CONCORD PIKE & NEW MURPHY ROAD	4 3 STREET ADDRESS	2665 FITE RD.				
CITY - ST - ZIP	WILMINGTON DE 19897	4.4 CITY - ST - ZIP	MEMPHIS TN 38127	£77.05			
TITLE	ATC DELETE	5. 1 TITLE		Change	Addition		
NAME	GANEY, RICHARD G.	5.2 NAME					
STREET ADDRESS	10145 MORGAN RIDGE DR	5.3 STREET ADORESS					
CITY-ST-ZIP	AFFTON MO	5.4 CITY - ST - ZIP		F1 05	- Addition		
TITLE	T DELETE	6.1 TITLE		☐ Change	Addition		
NAME	SCHUEFTAN, NORMAN	6 2 NAME					
STREET ADDRESS	CONCORD PIKE & NEW MURPHY ROAD	63 STREET ADDRESS					
CHTY-ST-ZIP	WILMINGTON DE 19897	64 CITY-ST-ZIP					

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:

SIGNATURE AND TYPER OF PRINTED NAME OF SIGNATURE OF PRINTED PARKET OF PARKET OF PRINTED PARKET OF PARKET OF

MING OFFICER OR DIRECTOR

CR2E034 (12/95)