

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # K32387

(8)

MAIL

1. Corporation Name

GRIETZ THREADS, INC.



Principal Place of Business

NO 1 LEGGETT RD
CARTHAGE MO 64836
US

Mailing Address

NO. 1 LEGGETT ROAD
CARTHAGE MO 64836
US

2. Principal Place of Business

21 13800 NW 4th Street

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

Sunrise, FL

28 City & State

Zip

Country

Country

3. Date Incorporated or Qualified

09/06/1988

3a. Date of Last Report

04/05/1995

4. FEI Number

65-0078716

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes.

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
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

FL

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

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
D SHERMAN, THOMAS D
STREET ADDRESS
ONE LEGGETT RD.
CITY- ST- ZIP
CARTHAGE MO

TITLE ☐ DELETE

NAME
CCEO GRIETZ, MICHAEL
STREET ADDRESS
13800 NW 4TH ST.
CITY- ST- ZIP
SUNRISE FL

TITLE ☐ DELETE

NAME
PCOO WHITE, M. BURL
STREET ADDRESS
13800 NW 4TH ST.
CITY- ST- ZIP
SUNRISE FL

TITLE ☐ DELETE

NAME
VP GLAUBER, MICHAEL
STREET ADDRESS
ONE LEGGETT RD.
CITY- ST- ZIP
CARTHAGE MO

TITLE ☐ DELETE

NAME
T HIGDON, SUSAN S
STREET ADDRESS
100 LEGGETT RD.
CITY- ST- ZIP
CARTHAGE MO

TITLE ☐ DELETE

NAME
VP PURSER, KENNETH W
STREET ADDRESS
NO. 1 LEGGETT RD
CITY- ST- ZIP
CARTHAGE MO

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D/S/V ☐ Change ☒ Addition

1.2 NAME Ernest C. Jett
1.3 STREET ADDRESS No. 1 Leggett Road
1.4 CITY- ST- ZIP Carthage, MO 64836

2.1 TITLE V ☐ Change ☒ Addition

2.2 NAME Robert A. Jefferies
2.3 STREET ADDRESS No. 1 Leggett Road
2.4 CITY- ST- ZIP Carthage, MO 64836

3.1 TITLE P ☒ Change ☐ Addition

3.2 NAME Burl M. White
3.3 STREET ADDRESS 13800 NW 4th Street
3.4 CITY- ST- ZIP Sunrise, FL 33325

4.1 TITLE V/AS/AT ☒ Change ☐ Addition

4.2 NAME Michael A. Glauber
4.3 STREET ADDRESS No. 1 Leggett Road
4.4 CITY- ST- ZIP Carthage, MO 64836

5.1 TITLE T ☒ Change ☐ Addition

5.2 NAME Susan S. Higdon
5.3 STREET ADDRESS No. 1 Leggett Road
5.4 CITY- ST- ZIP Carthage, MO 64836

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 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)(c), 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 TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kenneth W. Purser

Date

(417) 358-8131

Daytime Phone

CR2E034 (12/95)