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

Apr 21 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (5) DAD'S PRODUCTS COMPANY, INC. Principal Place of Business Mailing Address P.O. BOX 451-D P.O. BOX 451-D MILL & CLAY STREETS MEADVILLE PA 18335 MILL & CLAY STREETS **MEADVILLE PA 16335** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/21/1985 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 25-1235222 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Ζīρ Country Zip Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 29 24 30 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 Zip Code 84 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) Signature, typed or ported name of registered agent and little if applicable DATE CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition 1 1 TITLE TITLE LANG, GEORGE A. JR. NAME 1.2 NAME 2710 N.E. 24TH ST S 1.3 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33064 1.4 CITY-ST-ZIP CITY - ST - ZIP Change DELETE Addition 2.1 TITLE LANG, G. THOMAS 22 NAME MILL & CLAY STREETS STREFT ADDRESS 2.3 STREET ADDRESS MEADVILLE PA CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Addition 3 1 TITLE TITLE LANG, RICHARD A. JR. NAME 3.2 NAME MILL & CLAY STREETS 3 3 STREET ADDRESS STREET ADORESS MEADVILLE PA CITY-ST-ZIP 3 4. CITY-ST-ZIP Change DELETE \_\_\_ Addition 4.1 TITLE TITLE LANG, RICHARD A. SR. 4. 2 NAME NAME **MILL & CLAY STREETS** 4.3 STREET ADDRESS STREET ADDRESS MEADVILLE PA 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition 5 F TITLE TITLE MOYER, RICHARD D. NAME 5.2 NAME MILL & CLAY STREETS STREET ADDRESS 5.3 STREET ADDRESS MEADVILLE PA 54 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition 61 TITLE TITLE 6.2 NAME NAME

6.3 STREET ADDRESS

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. 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.

Richard D. hogel

STREET ADDRESS CITY - ST - ZIP

SIGNATURE:

**FILED** 

Richard D. Moyer, Treasurer

(814) 724-7710