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

PROFIT CORPORATION ANNUAL REPORT 1997

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Moltham 😘

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P36462

(0)

REED MANUFACTURING COMPANY, INC.

FILED Jun 03 1997 8:00am Secretary of State

S SUBSTANCE THE SAME BOTTA BANKS BINES AT THE STORE BOTTA BANKS BEEN BOTTA BOTTA SON

Principal Place of Business Mailing Address									- 1 AUDITUUL AUD FEIFE DEFIE DEFIE DEFIE DEFIED BEFELD FEIDE DEFIE DEFIE DEFIE BEGELF DEFIE FORDE				
1030 8 VETERANS BLVD BOX 690 TUPELO MS 38802				1030 S VETERANS BLVD BOX 650 TUPELO MS 38802-0650									
							3. Date incorporated or Qualified 3a. Date of Last Report 11/26/1991 04/23/1996						
2. Principal Place of Business				2a. Mailing Address				4. FEI Number			A	Applied For	
21				26					64-0389244 Not Applicable				
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired See Required Fee Required					
City & State				City & State					6. Election Campaign Financing Trust Fund Contribution	-	<u></u>		May Be to Fees
Zip		Country	ļ,	Zip	<u> </u>	Country			8. This corporation has liability for				s. 199.032,
24		25	29	[30]				Florida Statutes Yes X No 10. Name and Address of New Registered Agent					
9. Name and Address of Current Registered Agent							Nan	ne	10. Name and Address of New I	regisi	tered A	Benr	
TAYLOR, GEORGE M.						81							
1545Ñ NEW BARN ROAD SUITE 218						82	Stre	et Addre	ss (P.O. Box Number is Not Accept	table)			
MIAMI LAKES FL 33014													
						84	City				FL	85 Zip	Code
office or r	registered age	ent, or both, in the S	itate of Flori	07.1508, Florida Sta da. Such change wa l. Section 607.0505,	as autho	orized by	the c	ed corpo corporatio	ration submits this statement for the on's board of directors. I hereby acc	e purp ept th	ose of te appo	changing pintment a	its registered s registered
SIGNATURE	ALLE HARLESTINGS. BELLE	in and accept the c	onganone o	1, 5551,511,551,155551	,								
Signature, typed or printed name of registered agent and title if applicable (NOTE: Re							nt signa	ture required	d when reinstating)		DATE		
12.	n/s	OFFICERS	AND DIRE	CTORS DELETE		13.		<u>-</u>	ADDITIONS/CHANGES TO OF	FICER		DIRECTO Change	
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STREET ADDRESS	1000 0 1000000110 01100						1.3 STREET ADORESS						
CITY-ST-ZIP	TUPELO N					1.4 CITY - S'		~					
TITLE	STV			☐ DELETE		2.1 TITLE						☐ Change	Addition
NAME		GEORGE M.			1	2.2 NAME							
STREET ADDRESS		ETERANS BLVD		25			2.3 STREET ADDRESS						
CITY-ST-ZIP	TUPELO N	<u>as</u>				2. 4 CITY - S	1 - ZIP						
TITLE	D			DELETE		3.1 TITLE						Change	Addition
NAME	REED, R				1	3.2 NAME							
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CITY-ST-ZIP TITLE	CD	NO.		DELETE		3.4. CITY - 9 4.1 TITLE	1 - ZIP					Change	Addition
NAME	REED, JA	CK R				4. 2 NAME							
STREET ADDRESS		ETERANS BLVD				4.3 STREET	ADDRES	ss					
CITY-ST-ZIP	TUPELO N	AS				4.4 CITY - S							
TITLE	1			☐ DELETE		5.1 TITLE						☐ Change	Addition
NAME					•	5.2 NAME							
STREET ADDRESS	Į.				I	5.3 STREET	ADDRES	SS					
CITY-ST-ZIP				7		5.4 CITY - S	T-ZIP						
TITLE				☐ DELETE	- 1	6.1 TITLE						Change	Addition
NAME	ļ					6.2 NAME							

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 14. I do 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; and that my name appears in Block 12 or Block 13 if or inged, or on an attachment with address.