

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 # P31789

(1)

1. Corporation Name

MERRILLAT CORPORATION

Principal Place of Business

5353 W US 223
ADRIAN MI 49221
US

Mailing Address

21001 VAN BORN RD.
TAYLOR MI 48180



3. Date Incorporated or Qualified

11/09/1990

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

38-2913618

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$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

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE

NAME MERILLAT, RICHARD D.
STREET ADDRESS 5353 WEST US 223
CITY-ST-ZIP ADRIAN MI

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE VDAS ☐ DELETE

NAME BRIGHT, GERALD
STREET ADDRESS 21001 VAN BORN RD.
CITY-ST-ZIP TAYLOR MI

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE VASD ☐ DELETE

NAME MOSTELLER, RICHARD G.
STREET ADDRESS 21001 VAN BORN RD.
CITY-ST-ZIP TAYLOR MI

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE TV ☐ DELETE

NAME THURMAN, JOHN D.
STREET ADDRESS 5353 WEST US 223
CITY-ST-ZIP ADRIAN MI

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE DV ☐ DELETE

NAME LYON, WAYNE B.
STREET ADDRESS 21001 VAN BORN RD.
CITY-ST-ZIP TAYLOR MI

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE VP ☐ DELETE

NAME DORAN, DAVID A
STREET ADDRESS 21001 VAN BORN RD
CITY-ST-ZIP TAYLOR MI

6.1 TITLE

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)(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 TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/96

313-274-7400

Date

Daytime Phone #

CR2E034 (12/95)