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

CORPORATION
ANNUAL REPORT
1995

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

FILED
1995 JUL 25 AM 9:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 284623 (6)

1. Corporation Name
MILDITROL CO., INC.

Principal Place of Business
2060 NE COACHMAN RD
CLEARWATER FL 34625

Mailing Address
2060 NE COACHMAN RD
CLEARWATER FL 34625

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/27/1964
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business (21)
Suite, Apt. #, etc. (22)
City & State (23)
Zip (24) County (25)

2a. Mailing Address (26)
Suite, Apt. #, etc. (27)
City & State (28)
Zip (29) County (30)

4. FEI Number: 59-1058217 — 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
GRAHAM, RICHARD K
1933 SUMMIT DR
CLEARWATER FL 34623

10. Name and Address of New Registered Agent
01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City FL 05 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 resigning) DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| TITLE | ST | 1.1 TITLE | ☐ Change ☐ Addition |
| NAME | GRAHAM, RICHARD A | 1.2 NAME | |
| STREET ADDRESS | 2226 TORNADO COURT | 1.3 STREET ADDRESS | |
| CITY ST ZIP | CLEARWATER FL | 1.4 CITY ST ZIP | |
| TITLE | P | 2.1 TITLE | ☐ Change ☐ Addition |
| NAME | GRAHAM, RICHARD K | 2.2 NAME | |
| STREET ADDRESS | 1933 SUMMIT DR | 2.3 STREET ADDRESS | |
| CITY ST ZIP | CLEARWATER FL | 2.4 CITY ST ZIP | |
| TITLE | V | 3.1 TITLE | ☐ Change ☐ Addition |
| NAME | GRAHAM, WANDA J | 3.2 NAME | |
| STREET ADDRESS | 1933 SUMMIT DR | 3.3 STREET ADDRESS | |
| CITY ST ZIP | CLEARWATER FL | 3.4 CITY ST ZIP | |
| TITLE | | 4.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY ST ZIP | | 4.4 CITY ST ZIP | |
| TITLE | | 5.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY ST ZIP | | 5.4 CITY ST ZIP | |
| TITLE | | 6.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY ST ZIP | | 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 abovegoing, or on an attachment with an address.

SIGNATURE: Richard K. Graham, Richard K. Graham 7-19-95 443-2557
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0360306 CP