

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 20, 1999 8:00 am
Secretary of State

04-20-1999 90290 031 ***150.00

DOCUMENT # 339507

1. Corporation Name
THE R & S MCCOY CORPORATION

Principal Place of Business

440 N. E. 5TH AVENUE
P.O. BOX 419
DELRAY BCH FL 33447-7419

Mailing Address

440 N. E. 5TH AVENUE
P.O. BOX 419
DELRAY BCH FL 33447-7419
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/31/1968

4. FEI Number

59-1289508

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

One Culligan Pkwy

Northbrook, IL

60062

USA

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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 D/C
NAME PERTZ, DOUGLAS A.
STREET ADDRESS ONE CULLIGAN PARKWAY
CITY-ST-ZIP NORTHBROOK IL 60062

☒ DELETE

TITLE D/V
NAME SALVATI, MICHAEL E.
STREET ADDRESS ONE CULLIGAN PARKWAY
CITY-ST-ZIP NORTHBROOK IL 60062

☒ DELETE

TITLE D/S
NAME CHRISTENSEN, EDWARD A.
STREET ADDRESS ONE CULLIGAN PARKWAY
CITY-ST-ZIP NORTHBROOK IL 60062

☒ DELETE

TITLE P
NAME CROWELL, MIKE
STREET ADDRESS 1401 SLIGH BLVD
CITY-ST-ZIP ORLANDO FL 32856

☒ DELETE

TITLE V
NAME PAVLICK, THOMAS E.
STREET ADDRESS ONE CULLIGAN PARKWAY
CITY-ST-ZIP NORTHBROOK IL 60062

☐ DELETE

TITLE V/T
NAME FULLER, DONALD A.
STREET ADDRESS ONE CULLIGAN PARKWAY
CITY-ST-ZIP NORTHBROOK IL 60062

☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP
1.2 NAME Calvin R. Hendrix
1.3 STREET ADDRESS One Culligan Pkwy
1.4 CITY-ST-ZIP Northbrook, IL 60062

☐ Change ☒ Addition

2.1 TITLE D.V.P. S
2.2 NAME Michael E. Hulme, Jr
2.3 STREET ADDRESS One Culligan Pkwy
2.4 CITY-ST-ZIP Northbrook, IL 60062

☐ Change ☒ Addition

3.1 TITLE D.V.P. T
3.2 NAME Ross M. Campbell
3.3 STREET ADDRESS One Culligan Pkwy
3.4 CITY-ST-ZIP Northbrook, IL 60062

☐ Change ☒ Addition

4.1 TITLE AS
4.2 NAME Amy G. Gossin
4.3 STREET ADDRESS 40-004 Cook St.
4.4 CITY-ST-ZIP Palm Desert, CA 92211

☐ Change ☒ Addition

5.1 TITLE AT
5.2 NAME William F White
5.3 STREET ADDRESS One Culligan Pkwy
5.4 CITY-ST-ZIP Northbrook, IL 60062

☐ Change ☒ Addition

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; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/99

Date

Daytime Phone #

414-521-8504

CR2E034 (11/98)