

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

CORPORATION ANNUAL REPORT 1995		 SECRETARY OF STATE Joni Smith Secretary of State DIVISION OF CORPORATIONS		APPROVED AND FILED	
1. Corporation Name JORDAN BLYTHE CO., INC.		DOCUMENT # 532972 (7)		1995 MAY -1 PM 1:12 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Mailing Address 12 WEST SHERWOOD OVERLAND MO 63114 US		Principal Place of Business 12 WEST SHERWOOD OVERLAND MO 63114 US		DO NOT WRITE IN THIS SPACE	
If above addresses are incorrect in any way, list through incorrect information and enter correction below					
2. Mailing Address 21 State, Apt. #, etc. 22 City & State 23 Zip 24		2a. Principal Place of Business 26 State, Apt. #, etc. 27 City & State 28 Zip 29		3. Date Incorporated or Qualified 05/04/1977 3a. Date of Last Report 05/07/1993 4. FBI Number 59-1945513 5. Certificate of Status Desired \$8.75 ☐ 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees ☐ 7. Nonprofit Exempt from \$138.75 Supplemental Fee ☐ 8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	
9. Name and Address of Current Registered Agent TRAUTMAN NANCY 2321 NE 34TH COURT LIGHTHOUSE FL 33064			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 or Sections 617.0502 and 617.1508, 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 or 617.0503, Florida Statutes.					
SIGNATURE (Optional Agent Accepting Appointment) (If Not, This Agent Accepts Appointment as Noted in Block 12)			DATE		
12. OFFICERS AND DIRECTORS			13. CHANGES TO OFFICERS AND DIRECTORS IN 12		
11 TITLE D/P 12 NAME ROTH, KATHRYN A. 13 STREET ADDRESS 12 WEST SHERWOOD 14 CITY ST ZIP ST. LOUIS MO 21 TITLE D/S/T 22 NAME BUDDMEYER JAN 23 STREET ADDRESS 12 WEST SHERWOOD 24 CITY ST ZIP ST. LOUIS MO 63114 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY ST ZIP 41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY ST ZIP 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY ST ZIP 61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY ST ZIP			11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY ST ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY ST ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY ST ZIP 41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY ST ZIP 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY ST ZIP 61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY ST ZIP		

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not comply for the exemption stated in Section 110.07(3)(b), Florida Statutes. I understand that the information submitted on this annual report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath. I have fulfilled all obligations concerning the annual report required by Chapter 717, Florida Statutes; that I am an officer or director of the corporation or the receiver or liquidator of the corporation; and that my name appears in Block 12 or Block 13 if changed, or on an attached sheet.

SIGNATURE: Kathryn A. Kaeb

4-11-95