

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Feb 26 1996 8:00 am
Secretary of State

DOCUMENT # 809401 (3)

1. Corporation Name

COURTAULDS COATINGS, INC.

CHECK # A003122



Principal Place of Business

Mailing Address

400 SOUTH 13TH STREET
P.O. BOX 1439
LOUISVILLE KY 40203

400 SOUTH 13TH STREET
P.O. BOX 1439
LOUISVILLE KY 40203

3. Date Incorporated or Qualified
07/09/1953

3a. Date of Last Report
04/17/1995

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24.

25.

29.

30.

4. FEI Number
61-0310940

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, type or print name of registered agent and state if acceptable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PC ☒ DELETE
NAME RAVENHALL, COLIN W.
STREET ADDRESS 400 S. 13TH ST.
CITY-ST-ZIP LOUISVILLE KY

1.1 TITLE CEO/President ☐ Change ☒ Addition
1.2 NAME Neville Petersen
1.3 STREET ADDRESS 400 South 13th Street
1.4 CITY-ST-ZIP Louisville, Kentucky 40203

TITLE CFO ☐ DELETE
NAME LANDLESS, DAVID
STREET ADDRESS 400 S. 13TH ST.
CITY-ST-ZIP LOUISVILLE KY

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE VSD ☒ DELETE
NAME NIBLOCK, W ROBERT
STREET ADDRESS 400 S. 13TH ST.
CITY-ST-ZIP LOUISVILLE KY

3.1 TITLE Corporate Secretary ☐ Change ☒ Addition
3.2 NAME Steven H. Lyverse
3.3 STREET ADDRESS 400 South 13th Street
3.4 CITY-ST-ZIP Louisville, Kentucky 40203

TITLE V ☐ DELETE
NAME HORTON, L THOMAS
STREET ADDRESS 400 S. 13TH ST.
CITY-ST-ZIP LOUISVILLE KY

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE P ☒ DELETE
NAME CHAPMAN, JAMES K
STREET ADDRESS 400 SOUTH 13TH STREET
CITY-ST-ZIP LOUISVILLE KE

5.1 TITLE Vice President ☐ Change ☒ Addition
5.2 NAME Jacques Mayer
5.3 STREET ADDRESS 400 South 13th Street
5.4 CITY-ST-ZIP Louisville KY 40203

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
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

02-05-96

502-588-9355

Date

Daytime Phone #

CR2E034 (12/95)