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Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1997**

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

DOCUMENT # 815047 (6)

1. Corporation Name: Carolina Solite Corporation

Principal Place of Business	Mailing Address
2508 Chamberlayne Ave Richmond Va 23222	— Same

3. Date Incorporated or Qualified: 2/10/61	3a. Date of Last Report: 2/1/96
4. FEI Number: 54-0562217	☐ 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	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CT Corporation System 1200 S. Pine Island Rd 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	J.W. Roberts		1.2 NAME	
STREET ADDRESS	3204 Hawthorne Ave		1.3 STREET ADDRESS	
CITY-ST-ZIP	Richmond Va 23222		1.4 CITY-ST-ZIP	
TITLE	Sr. V.P	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	A.C. Ford Jr		2.2 NAME	
STREET ADDRESS	5313 Tuckahoe Ave		2.3 STREET ADDRESS	
CITY-ST-ZIP	Richmond Va 23226		2.4 CITY-ST-ZIP	
TITLE	V.P	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	W.T. Johnson		3.2 NAME	
STREET ADDRESS	811 S. Edgewood Rd		3.3 STREET ADDRESS	
CITY-ST-ZIP	Eden NC 27288		3.4 CITY-ST-ZIP	
TITLE	Treasurer	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	L.A. Facetti		4.2 NAME	
STREET ADDRESS	13925 Citation Dr		4.3 STREET ADDRESS	
CITY-ST-ZIP	Midlothian Va 23112		4.4 CITY-ST-ZIP	
TITLE	Secretary	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	J.J. Jewett III		5.2 NAME	
STREET ADDRESS	11700 Young Manor Dr		5.3 STREET ADDRESS	
CITY-ST-ZIP	Midlothian Va 23113		5.4 CITY-ST-ZIP	
TITLE	Asst. Sec.	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	J.W. Thornton		6.2 NAME	100002134111
STREET ADDRESS	108 Running Cedar Ln		6.3 STREET ADDRESS	-04/04/97--01039--021
CITY-ST-ZIP	Richmond Va 23229		6.4 CITY-ST-ZIP	***165.00

CR2E034 (9/96)

14. I do 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.

SIGNATURE: Lee A Facetti LEE A. FACETTI 3/24/97 804 321 6761
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #