

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 14 PM 3:57

DOCUMENT # 817290 (0)

1. Corporation Name
HENRY J. KAISER COMPANY

Principal Place of Business
1800 HARRISON STR
OAKLAND CA 94612
US

Mailing Address
1800 HARRISON STR
OAKLAND CA 94612
US

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		25		08/16/1963	02/23/1994
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FBI Number	Applied For
22		27		94-1229195	Not Applicable
City & State		City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23		28		<input type="checkbox"/>	
Zip	Country	Zip	Country	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	25	29	30	<input type="checkbox"/>	
9. Name and Address of Current Registered Agent				8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301				<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301				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 _____ (NOTE: Registered Agent signature required when registering) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	XXI Change <input type="checkbox"/> Addition
NAME	LIST, RAYMOND E	1.2 NAME	Rapp, Alvin S.
STREET ADDRESS	1800 HARRISON STREET	1.3 STREET ADDRESS	1800 Harrison Street
CITY-ST-ZIP	OAKLAND CA	1.4 CITY-ST-ZIP	Oakland, CA 94612
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOLDMAN, MICHAEL K	2.2 NAME	
STREET ADDRESS	1800 HARRISON STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	OAKLAND CA	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARTINEZ, LEONARD A	3.2 NAME	
STREET ADDRESS	1800 HARRISON STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	OAKLAND CA	3.4 CITY-ST-ZIP	
TITLE	S	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEEKS, PAUL I	4.2 NAME	
STREET ADDRESS	1800 HARRISON STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	OAKLAND CA	4.4 CITY-ST-ZIP	
TITLE	VS	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BONITZ, RICHARD E	5.2 NAME	
STREET ADDRESS	1800 HARRISON STREET	5.3 STREET ADDRESS	
CITY-ST-ZIP	OAKLAND CA	5.4 CITY-ST-ZIP	
TITLE	T	6.1 TITLE	XXXI Change <input type="checkbox"/> Addition
NAME	SPOEHEL, RONALD R	6.2 NAME	Nason, Richard K.
STREET ADDRESS	1800 HARRISON STREET	6.3 STREET ADDRESS	1800 Harrison Street
CITY-ST-ZIP	OAKLAND CA	6.4 CITY-ST-ZIP	Oakland, CA 94612

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the Small Business Director in Section 119.07(3)(b), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Richard E. Bonitz* Vice President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER, OFFICER OR DIRECTOR

2-3-95 510-419-6875