

**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

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

3. Date Incorporated or Qualified: 08/16/1963  
3a. Date of Last Report: 02/14/1995  
4. FEI Number: 94-1229195  
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: 21 Suite, Apt. #, etc; 22 City & State; 23 Zip; 24 Country  
2a. Mailing Address: 26 Suite, Apt. #, etc; 27 City & State; 28 Zip; 29 Country; 30 Country

9. Name and Address of Current Registered Agent: CORPORATION SERVICE COMPANY, 1201 HAYS STREET, TALLAHASSEE FL 32301  
10. Name and Address of New Registered Agent: 81 Name; 82 Street Address (P.O. Box Number is Not Acceptable); 83; 84 City; 85 Zip Code (FL)

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 reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	NAME: RAPP, ALVIN S	1.1 TITLE:	Change <input type="checkbox"/> Addition <input type="checkbox"/>
STREET ADDRESS: 1800 HARRISON STREET	CITY-ST-ZIP: OAKLAND FL	12 NAME:	
TITLE: VD	NAME: GOLDMAN, MICHAEL K	13 STREET ADDRESS:	Change <input type="checkbox"/> Addition <input type="checkbox"/>
STREET ADDRESS: 1800 HARRISON STREET	CITY-ST-ZIP: OAKLAND CA	14 CITY-ST-ZIP:	
TITLE: V	NAME: MARTINEZ, LEONARD A	2.1 TITLE:	Change <input type="checkbox"/> Addition <input type="checkbox"/>
STREET ADDRESS: 1800 HARRISON STREET	CITY-ST-ZIP: OAKLAND CA	2.2 NAME:	
TITLE: S	NAME: WEEKS, PAUL I	2.3 STREET ADDRESS:	Change <input type="checkbox"/> Addition <input type="checkbox"/>
STREET ADDRESS: 1800 HARRISON STREET	CITY-ST-ZIP: OAKLAND CA	2.4 CITY-ST-ZIP:	
TITLE: VS	NAME: BONITZ, RICHARD E	3.1 TITLE:	Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
STREET ADDRESS: 1800 HARRISON STREET	CITY-ST-ZIP: OAKLAND CA	3.2 NAME:	Assistant Secretary
TITLE: T	NAME: NASON, RICHARD K	3.3 STREET ADDRESS:	Catherine N. Howland
STREET ADDRESS: 1800 HARRISON STREET	CITY-ST-ZIP: OAKLAND CA	3.4 CITY-ST-ZIP:	1800 Harrison Street
		4.1 TITLE:	Oakland, CA 94612
		4.2 NAME:	
		4.3 STREET ADDRESS:	
		4.4 CITY-ST-ZIP:	
		5.1 TITLE:	Change <input type="checkbox"/> Addition <input type="checkbox"/>
		5.2 NAME:	
		5.3 STREET ADDRESS:	
		5.4 CITY-ST-ZIP:	
		6.1 TITLE:	Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
		6.2 NAME:	Treasurer
		6.3 STREET ADDRESS:	Kenneth D. Campbell
		6.4 CITY-ST-ZIP:	1800 Harrison Street

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: Catherine N. Howland  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Date: 1/24/96  
Daytime Phone #: (510) 419-6875

CR2E034 (12/95)