FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 827241 (1)

DAYTON SUPERIOR CORPORATION

FILED

May 13 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address							A DANIE OLDEF	Ufilli iddi	
721 RICHARD		721 RICHARD ST.							
MIAMISBURG OH 45342-1840		MIAMISBURG OH 45342-1840							
						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified 12/30/1971			
Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	Anı	plied For	
21 PHINO(PALE)	poe or pasinoss	26				31-0676346	 	Applicable	
Suite, Apt i	#. etc.	Suite, Apt. #, otc.					\$8.75 A		
22		27				5. Certificate of Status Desired	Fee Red	quired	
City & State	9	City & State				6. Election Campaign Financing	\$5.00	May Be	
23		28				Trust Fund Contribution	Added to	o Fees	
Zip	Country	Zip	Coun			8. This corporation owes or has paid the curren			
24	25	29	30			Personal Property Tax due June 30.		l No	
	9. Name and Address of Current	Registered Agent		B1	Name	10. Name and Address of New Registered Age	JITE		
C T CORPORATION SYSTEM				٠.	Name				
	O S. PINE ISLAND ROAD			62	Street A	Address (P.O. Box Number is Not Acceptable)			
PLA	INTATION FL 33324		-	83					
				84	City	FL	85 Zip C	code	
11, Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the				OVE	e-named c	corporation submits this statement for the purpose of ch	anging its	registered	
office or re	egistered agent, or both, in the State on familiar with, and accept the obligations.	of Florida. Such ch ange was :	authorized	i by	the corpo	oration's board of directors. I hereby accept the appoin	tment as r	registered	
	m tamillar with, and accept the obliga-	libris of, accordin 607,0000, Fil	oriua Statt	льз	١.				
SIGNATURE	Signature, typed or printed name of regedered agen	CON) description (NO)	It : Registered	Aga	nt signature r	required when reinstating) DATE			
12.	OFFICERS AND DIRECTORS		13.	13.		ADDITIONS/CHANGES TO OFFICERS AND D			
TITLE	P	DELETE	1.1 10	LF		L	Change	Addition	
NAME	CICCARELLI, JOHN A.			ME					
STREET ADDRESS	2626 INDIAN WELLS DR.			1.3 STREET ADDRESS					
CITY-ST-ZIP	XENIA OH	NA UN		1.4 CITY - ST - ZIP			Change	Addition	
TITLE	VP			2.1 HTLE		L-	1 Onlange	L Addition	
NAME	DEIS, MICHAEL C. 1245 LONG ROAD			2 2 NAME 2 3 STREET ADDRESS					
STREET ADDRESS	XENIA OH	1							
CITY-ST-ZIP TITLE	VP			LF	ST - ZiP		Change	Addition	
NAME	PAINE, JOHN R., JR.		3.2 NA				. •		
STREET ADDRESS	A A ALMANI ANNEL DALB				ADDRESS				
CITY-ST-ZIP	CENTERVILLE OH		3.4. CiT						
TITLE	VGM	☐ DELETE	4.1 TIT				Change	Addition	
NAME	FENNESSY, JAMES W.		4. 2 NAME						
STREET ADDRESS	BOX 495, MAPLE		4.3 STREE		ADDRESS				
CITY-ST-ZIP	ONTARIO LEA 183 CAN.		4.4 CIT	Y-\$	T-ZIP				
TITLE	VP	DELETE	5.1 Til	LE		<u> </u>	Change	Addition	
NAME	STEWART, JAMES C.		5.2 NA	ME	ļ				
STREET ADDRESS	914 KINGS CANYON WAY		5.3 STREET		ADDRESS	721 Richard St			
CITY-ST-ZIP	BREA CA		5.4 CITY		T-ZIP	Miamisburg OH 45342	10	Addition.	
TITLE	VF	DELETE	6.1 TH		}	, 1 Com	Change	Addition	
NAME	BRASWELL, RICHARD L.		- 1	6.2 NAME		John M Routherford			
STREET ADDRESS	71 TERRACE VILLA DR.		6.3 ST	REET	ADDRESS	721 Richard St			

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(%, 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.

and Notel 1 1

4/-- /00 /0-1011-1211