

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 # 829859 (8)

1. Corporation Name

BALDOR ELECTRIC COMPANY



Principal Place of Business

5711 S 7TH ST  
FT SMITH AR 72901

Mailing Address

5711 S 7TH ST  
FT SMITH AR 72901

3. Date Incorporated or Qualified  
04/10/1973

3a. Date of Last Report  
05/01/1995

2. Principal Place of Business

21 5711 S Borcham, Jr ST

Suite, Apt. #, etc.

22 Fort Smith, AR

City & State

23

Zip

24 72902

Country

25 USA

2a. Mailing Address

26 5711 S Borcham, Jr ST

Suite, Apt. #, etc.

27 Fort Smith, AR

City & State

28

Zip

29 72902

Country

30 USA

4. FEI Number  
43-0168840

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

10. Name and Address of New Registered Agent

9. Name and Address of Current 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE AS  
NAME SCHOCK, G A  
STREET ADDRESS 10473 BELLEFONTAINE RD  
CITY-ST-ZIP ST LOUIS, MO 00000

☒ DELETE

TITLE PD  
NAME QUALLS, R. L.  
STREET ADDRESS 2407 GREEN RIDGE DR.  
CITY-ST-ZIP FT SMITH AR

☐ DELETE

TITLE C  
NAME DOREHAM JR, R S  
STREET ADDRESS 5309 YANTIS  
CITY-ST-ZIP FORT SMITH, AR 00000

☐ DELETE

TITLE VST  
NAME DAVIS, LLOYD  
STREET ADDRESS 3220 VILLAGE RD  
CITY-ST-ZIP FT. SMITH AR

☐ DELETE

TITLE V  
NAME PEERBOLTE, JERRY D.  
STREET ADDRESS 2212 BRIGADOON  
CITY-ST-ZIP FT SMITH AR

☐ DELETE

TITLE V  
NAME ATKINS, THEODORE W.  
STREET ADDRESS 11011 HUNTERS POINT ROA  
CITY-ST-ZIP FORT SMITH AR

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☒ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

Gene J Hagedorn  
2630 Enid Place  
Fort Smith, AR 72901

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

2514 South 46th St

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

1816 Bramble Brae

☒ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

400001806214  
-05/03/96--01018--037

\*\*\*200.00

☐ Change ☐ Addition

6.1 TITLE

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)(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 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

Date

Daytime Phone #

501-646-4711