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 # 836781 1. Corporation Name THE EGGO COMPANY

(5)

Mailing Address

Principal Place of Business

FILED Apr 09 1998 8:00am Secretary of State



Till Cipal Flace	O DUSTITOSS	(vianing v	100,000				
ONE KELLOGO			LLOGG SOUARE			· ·	
PO BOX 3599 BATTLE CREEK MI 49016 US		PO BOX	CREEK MI 4901	6		DO NOT WRITE IN THIS SPACE	
		US	•			3. Date Incorporated or Qualified	
••						08/02/1976	
2. Principal Pi	ace of Business	2a, Mailir	2a. Mailing Address			4. FEI Number Applied For	
21		26	26			51-0190508 Not Applicable	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			SR 75 Additional	
22		27	27			5. Certificate of Status Desired Fee Required	
City & State	3	City &	City & State			6. Election Campaign Financing \$5.00 May Be	
23		28	8			Trust Fund Contribution Added to Fees	
Zip	Country	Zip		Country	•	8. This corporation owes or has paid the current year Intengible	
24	25	29		30		Personal Property Tax due June 30. Yes 🔀 No	
	9. Name and Address of Curren	t Registered	Agent			10. Name and Address of New Registered Agent	
	CORPORATION SYSTEM			81	Name		
	0 S. PINE ISLAND ROAD		82 Street Ad		Street	Address (P.O. Box Number is Not Acceptable)	
PLA	INTATION FL 33324			_			
				83			
				84	City	■■ 85 Zip Code	
				'	'		
11. Pursuant	to the provisions of Sections 607.050	2 and 607 150	8, Florida Statu	ites, the abov	e-named	d corporation submits this statement for the purpose of changing its registered	
egent. La	egistered agent, or both, in the State m familiar with, and accept the obliga	ations of, Sect	on change was ion 607.0505, F	lorida Statute	y the cor \$.	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered	
SIGNATURE							
SIGNATORIE	Signature, typod or printed hame of registered age	of and title if applic	able (NC		ent signature	e required when reinslating) DATE	
12.	OFFICERS ANI	D DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD		DELETE	1.1 TITLE		Change Addition	
NAME	THOMASON, D.W.			1.2 NAME			
STREET ADDRESS	ONE KELLOGG SOUARE			1.3 STREE	ADDRESS		
CITY-ST-ZIP	BATTLE CREEK MI			1.4 CITY -	ST-ZIP		
TITLE	VPD		DELETE	2.1 TITLE		Change Addition	
NAME	CLARK, R.M.			2.2 NAMÉ			
STREET ADDRESS	ONE KELLOGG SQUARE			2.3 STREE	ADDRESS		
CITY-ST-ZIP	BATTLE CREEK MI			2. 4 CITY -	ST-ZIP		
TITLE	5		DELETE	3.1 TITLE		Change Addition	
NAME	GILDEA, EDWARD			3.2 NAME			
STREET ADDRESS	ONE KELLOGG SQ.			3.3 STREE	ADDRESS		
City-St-Zip	BATTLE CREEK MI			3.4. CITY-	ST-ZIP		
TITLÉ			KX DELETE	4.1 TITLE		T Change K Addition	
NAME	KOLLING, J.F.			4, 2 NAME		Perry, W.S.	
STREET ADDRESS	ONE KELLOGG SQUARE			4.3 STREE	ADDRESS	One Kellogg Square	
CITY - ST - ZIP	BATTLE CREEK MI			4.4 CITY-	ST-ZIP	Battle Creek, MI	
TITLE	D		DELETE	5.1 TITLE		Change Addition	
NAME	HINTON, J. R			5.2 NAME			
STREET ADDRESS	ONE KELLOGG SQUARE			5.3 STREE	ADDRESS		
CITY-ST-ZIP	BATTLE CREEK MI			5.4 CITY-	ST-ZIP		
TITLE			☐ DELETE	6.1 TITLE		Change Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREE	T ADDRESS		
CITY-ST-ZIP				6.4 CITY-	ST-ZIP	·	

14. I 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 of the receiver of 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 changes. At or all attachment with an address.

SIGNATURE:

Treasurer

4/2/98

616/961-2000