

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 14, 1999 8:00 am
Secretary of State

04-14-1999 90168 020 ***150.00

DOCUMENT # 840294

1. Corporation Name

THE BABCOCK & WILCOX COMPANY

Principal Place of Business

P O BOX 61038
1450 POYDRAS ST
NEW ORLEANS LA 70161
US

Mailing Address

P O BOX 61038
1450 POYDRAS ST
NEW ORLEANS FL 70161
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/24/1978

4. FEI Number

13-2933685

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 owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New 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

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

T ☐ DELETE

JOLIFF, R A
1450 POYDRAS ST
NEW ORLEANS FL

V ☐ DELETE

HENZLER, TA
1450 POYDRAS ST
NEW ORLEANS LA

P ☐ DELETE

WOOD, J F
20 S VAN BUREN AVE
BARBERTON OH 44203

VPC ☒ DELETE

WOOLBERT, R E
1450 POYDRAS ST
NEW ORLEANS LA

VPGC ☐ DELETE

BETHARDS, B C
20 S VAN BUREN AVE
BARBERTON OH 44203

VPGM ☐ DELETE

KULIG, J S
20 S VAN BUREN AVE
BARBERTON OH 44203

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

SEE ATTACHED LISTING

☐ Change

☐ Addition

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

☐ Change

☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Senior V.P.-C.F.O.
Gaubert, D.R.

1450 Poydras St
New Orleans, LA 70112

☐ Change

☒ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change

☐ Addition

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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
A. Henzler
V.P.-Tax Administration

04/1/99

(504) 587-4411

Daytime Phone #

CR2E034 (11/98)