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PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 29 1997 8:00am  
Secretary of State

DOCUMENT # 845759 (0)

1. Corporation Name  
KELLERMEYER BUILDING SERVICES, INC.

Principal Place of Business

1575 HENTHORNE DR  
MAUMEE OH 43537  
US

Mailing Address

1575 HENTHORNE DR  
MAUMEE OH 43537-1372  
US

3. Date Incorporated or Qualified 04/17/1980  
3a. Date of Last Report 04/02/1996

4. FEI Number 34-1132807  
Applied For ☐  
Not Applicable ☐

6. 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 Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

BLANGOR, MICHAEL  
6104 NW 19TH COURT  
MARGATE FL 33063

10. Name and Address of New Registered Agent

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 D ☐ DELETE

NAME KELLERMEYER, DONALD  
STREET ADDRESS 1575 HENTHORNE DR  
CITY-ST-ZIP MAUMEE OH 43537

TITLE D ☐ DELETE

NAME LOCKART, H. CLARKE  
STREET ADDRESS 1575 HENTHORNE DR  
CITY-ST-ZIP MAUMEE OH 43537

TITLE D ☐ DELETE

NAME KELLERMEYER, TOM  
STREET ADDRESS 1575 HENTHORNE DR  
CITY-ST-ZIP MAUMEE OH 43537

TITLE CT ☐ DELETE

NAME SANDER, KEN  
STREET ADDRESS 1575 HENTHORNE DR  
CITY-ST-ZIP MAUMEE OH 43537

TITLE PD ☐ DELETE

NAME SIWA, KEVIN  
STREET ADDRESS 1575 HENTHORNE DR  
CITY-ST-ZIP MAUMEE OH 43537

TITLE VSD ☐ DELETE

NAME BEAM, ELIZABETH  
STREET ADDRESS 1575 HENTHORNE DR  
CITY-ST-ZIP MAUMEE OH 43537

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE:

Sandra B. Mortham

4/29/97

CP2E034 (9/96)