

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2007 8:00 am
Secretary of State

03-19-2007 90086 050 ***150.00

DOCUMENT # 849848

1. Entity Name
OWEN-AMES-KIMBALL CO.



Principal Place of Business
**300 IONIA AVE N W
GRAND RAPIDS, MI 49503**

Mailing Address
**11941 FAIRWAY LAKES DR.
FT. MYERS, FL 33913-8338**

60024775



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03122007

Chg-P

CR2E034 (12/06)

4. FEI Number
38-0900420

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SHIMP, STEVEN C
11941 FAIRWAY LAKES DR
SUITE #102
FT. MYERS, FL 33913**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME SCHOONVELD, WILLIAM
STREET ADDRESS 3389 SANDY BEACH
CITY-ST-ZIP WAYLAND, MI 49348

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME SHIMP, STEVEN C.
STREET ADDRESS 822 CYPRESS LANE CIRCLE
CITY-ST-ZIP FORT MYERS, FL 33919

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE STD ☐ Delete
NAME LA BARGE, JOHN C JR
STREET ADDRESS 7264 TORY DR
CITY-ST-ZIP HUDSONVILLE, MI 49426

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME BIEBER, RONALD L.
STREET ADDRESS 5421 FRONT STREET
CITY-ST-ZIP NEWAYGO, MI 49337

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME POST, GARY A
STREET ADDRESS 4460 DEER CREEK
CITY-ST-ZIP MUSKEGON, MI 49441

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] Treasurer

Date

Daytime Phone #

3/13/07 666/456 1521