

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

**FILED**  
**May 06, 1999 8:00 am**  
**Secretary of State**

05-06-1999 90160 013 \*\*\*150.00

0584316

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State <b>DIVISION OF CORPORATIONS</b>
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**DOCUMENT # 851348**

1. Corporation Name  
**STEADLEY COMPANY**

**MAIL**



Principal Place of Business <b>NO. 1 LEGGETT ROAD</b> <b>CARTHAGE MO 64836</b>	Mailing Address <b>NO. 1 LEGGETT ROAD</b> <b>TAX DEPT.</b> <b>CARTHAGE MO 64836</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>12/21/1981</b>	
21 Suite, Apt. #, etc.	26	27 Suite, Apt. #, etc.		4. FEI Number <b>43-1237516</b>	Applied For Not Applicable
22 City & State	27	28 City & State		5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
23 Zip	28	29 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
24 Country	25	30 Country		8. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
<b>CT CORPORATION SYSTEM</b> <b>1200 S. PINE ISLAND ROAD</b> <b>PLANTATION FL 03324</b>		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	<b>FL</b> 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		(NOTE: Registered Agent signature required when reinstating)		DATE	
Signature, typed or printed name of registered agent and title if applicable.					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	<b>S</b> <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<b>V</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	<b>MCPHERSON, MICHAEL J.</b>	1.2 NAME	<b>Robert A. Jeffries, Jr.</b>		
STREET ADDRESS	<b>NO. 1 LEGGETT ROAD</b>	1.3 STREET ADDRESS	<b>No. 1 Leggett Road</b>		
CITY-ST-ZIP	<b>CARTHAGE MO 64836</b>	1.4 CITY-ST-ZIP	<b>Carthage, Mo 64836</b>		
TITLE	<b>V</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	<b>PURSER, KENNETH W</b>	2.2 NAME			
STREET ADDRESS	<b>NO. 1 LEGGETT ROAD</b>	2.3 STREET ADDRESS			
CITY-ST-ZIP	<b>CARTHAGE MO 64836</b>	2.4 CITY-ST-ZIP			
TITLE	<b>T</b> <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	<b>BRADSHAW, SHERI L</b>	3.2 NAME			
STREET ADDRESS	<b>NO 1 LEGGETT ROAD</b>	3.3 STREET ADDRESS			
CITY-ST-ZIP	<b>CARTHAGE MO 64836</b>	3.4 CITY-ST-ZIP			
TITLE	<b>DV</b> <input type="checkbox"/> DELETE	4.1 TITLE	<b>DVS</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	<b>JETT, ERNEST C</b>	4.2 NAME	<b>Ernest C. Jett</b>		
STREET ADDRESS	<b>NO. 1 LEGGETT ROAD</b>	4.3 STREET ADDRESS	<b>No. 1 Leggett Road</b>		
CITY-ST-ZIP	<b>CARTHAGE MO 64836</b>	4.4 CITY-ST-ZIP	<b>Carthage, Mo 64836</b>		
TITLE	<b>V</b> <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	<b>GLAUBER, MICHAEL A</b>	5.2 NAME			
STREET ADDRESS	<b>NO. 1 LEGGETT ROAD</b>	5.3 STREET ADDRESS			
CITY-ST-ZIP	<b>CARTHAGE MO 64836</b>	5.4 CITY-ST-ZIP			
TITLE	<b>P</b> <input type="checkbox"/> DELETE	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	<b>CHENEY, WILLIAM J.</b>	6.2 NAME	<b>Karl G Glassman</b>		
STREET ADDRESS	<b>NO. 1 LEGGETT ROAD</b>	6.3 STREET ADDRESS	<b>No. 1 Leggett Road</b>		
CITY-ST-ZIP	<b>CARTHAGE MO 64836</b>	6.4 CITY-ST-ZIP	<b>Carthage, Mo 64836</b>		

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:** *Kenneth W Purser* **Kenneth W Purser - Vice President** **4/28/99** **417-358-8131**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)