

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 854153 (4)

1. Corporation Name

CRAFCO INCORPORATED



Principal Place of Business

6975 W CRAFCO WAY
CHANDLER AZ 85226-2510
US

Mailing Address

P.O. DRAWER 23028
JACKSON MS 39225-3028
US

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

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
09/23/1982

3a. Date of Last Report
04/28/1995

4. FEI Number
86-0324978

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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME LAMPTON, LESLIE B.
STREET ADDRESS 2829 LAKELAND DRIVE
CITY-ST-ZIP JACKSON MS ☐ DELETE

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

TITLE ST
NAME STONE, KATHRYN W.
STREET ADDRESS 2829 LAKELAND DRIVE
CITY-ST-ZIP JACKSON MS ☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP
NAME BROOKS, DONALD M.
STREET ADDRESS 6975 W. CRAFCO WAY
CITY-ST-ZIP CHANDLER AZ ☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE AS
NAME RIHERD, THOMAS S
STREET ADDRESS 6975 W CRAFCO WAY
CITY-ST-ZIP CHANDLER AZ ☐ DELETE

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

TITLE VPD
NAME LAMPTON, WILLIAM W
STREET ADDRESS 2829 LAKELAND DRIVE
CITY-ST-ZIP JACKSON MS ☐ DELETE

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

TITLE VP
NAME HOWARD, MARTIN L
STREET ADDRESS 2829 LAKELAND DRIVE
CITY-ST-ZIP JACKSON MS ☒ DELETE

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

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: MR. Thomas S. Riherd
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/96
Date

(602) 976-0406
Daytime Phone #

CR2E034 (12/95)

CRAFCO, INC.

89-0324978

ATTACHMENT TO 1996 FLORIDA ANNUAL REPORT

NAME	TITLE	STREET ADDRESS
A. PATRICK BUSBY	VICE-PRESIDENT	2829 LAKELAND DRIVE JACKSON, MS 39208 **DO NOT USE FOR MAILING**
MARK C. MANNING	VICE-PRESIDENT	6975 W. CRAFCO WAY CHANDLER, AZ 85226
J. RONALD ROBINSON	VICE-PRESIDENT	6975 W. CRAFCO WAY CHANDLER, AZ 85226
LESLIE B. LAMPTON, III	DIRECTOR	2829 LAKELAND DRIVE JACKSON, MS 39208 **DO NOT USE FOR MAILING**