

MAIL

2007 FOR PROFIT CORPORATION  
ANNUAL REPORTFILED  
Jul 30, 2007 8:00 am  
Secretary of State

07-30-2007 90065 036 \*\*\*150.00

DOCUMENT # F01000005037

1. Entity Name  
SPONGE-CUSHION, INC.Principal Place of Business  
902 ARMSTRONG STREET  
MORRIS, IL 60450Mailing Address  
902 ARMSTRONG STREET  
MORRIS, IL 60450

60053865



07192007 Chg-P CR2E034 (12/06)

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

No. 1 Leggett Road

Suite, Apt. #, etc.

3. Mailing Address

PO Box 757

Suite, Apt. #, etc.

City &amp; State

Carthage, MO

City &amp; State

Carthage, MO

4. FEI Number

36-3472009

Applied For

Not Applicable

Zip

64836

Country

USA

Zip

64836

Country

USA

5. Certificate of Status Desired ☐\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND RD  
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

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  
Due by September 14, 20079. Election Campaign Financing  
Trust Fund Contribution. ☐\$5.00 May Be  
Added to FeesIn accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

## 10. OFFICERS AND DIRECTORS

TITLE P ☒ Delete  
NAME MITCHELL, JOHN  
STREET ADDRESS 902 ARMSTRONG ST.  
CITY-ST-ZIP MORRIS, ILTITLE S ☒ Delete  
NAME MANCINI, GINO  
STREET ADDRESS 902 ARMSTRONG ST.  
CITY-ST-ZIP MORRIS, ILTITLE M ☒ Delete  
NAME REEDER, PHILIP  
STREET ADDRESS DURALAY LIMITED BROADWAY HASLINGDEN  
CITY-ST-ZIP ROSSENDALE, EN BB4-4STITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Change ☒ Addition  
NAME Michael S. Walters  
STREET ADDRESS No. 1 Leggett Road  
CITY-ST-ZIP Carthage, MO 64836TITLE V ☐ Change ☒ Addition  
NAME Kenneth W. Purser  
STREET ADDRESS No. 1 Leggett Road  
CITY-ST-ZIP Carthage, MO 64836TITLE S, D ☐ Change ☒ Addition  
NAME Ernest C. Jett  
STREET ADDRESS No. 1 Leggett Road  
CITY-ST-ZIP Carthage, MO 64836TITLE T ☐ Change ☒ Addition  
NAME Sheri L. Mossbeck  
STREET ADDRESS No. 1 Leggett Road  
CITY-ST-ZIP Carthage, MO 64836TITLE ☐ Change ☒ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP12. 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. *to the best of my knowledge and belief*

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kenneth W. Purser Vice President

Date

Daytime Phone #

7/20/07 417-358-8131