

MAIL

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2007 08:00 A
Secretary of State

DOCUMENT # F04000000452

1. Entity Name

LEGGETT & PLATT ASIA MARKETING, INC.



Principal Place of Business

NO. 1 LEGGETT RD
CARTHAGE, MO 64836

Mailing Address

NO. 1 LEGGETT RD
CARTHAGE, MO 64836



04132007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
43-1757868

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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**

000000754154
05/22/07-80050-024 150.00

10. OFFICERS AND DIRECTORS

TITLE	DVS
NAME	JETT, ERNEST C
STREET ADDRESS	NO. 1 LEGGETT ROAD
CITY-ST-ZIP	CARTHAGE, MO 64836
TITLE	P
NAME	SHEN, PHILIP Y
STREET ADDRESS	13798 NW 4TH STREET, SUITE 308
CITY-ST-ZIP	SUNRISE, FL 33325
TITLE	V
NAME	HAFFNER, DAVID S
STREET ADDRESS	2018 W. MORGAN HEIGHTS ROAD
CITY-ST-ZIP	CARTHAGE, MO 64836
TITLE	VAST
NAME	FLANIGAN, MATTHEW C
STREET ADDRESS	1309 S. MAIN
CITY-ST-ZIP	CARTHAGE, MO 64836
TITLE	V
NAME	GLASSMAN, KARL G
STREET ADDRESS	9732 EARLY LANE
CITY-ST-ZIP	CARTHAGE, MO 64836
TITLE	V
NAME	PURSER, KENNETH W
STREET ADDRESS	NO. 1 LEGGETT RD
CITY-ST-ZIP	CARTHAGE, MO 64836

**DO NOT WRITE
IN THIS SPACE**

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. *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 4/27/07 417 358-8131

Date Daytime Phone #