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May 08 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # F94000000554 (5)

1. Corporation Name

HARRIS SPECIALTY CHEMICALS, INC.

Principal Place of Business

8570 PHILLIPS HIGHWAY  
JACKSONVILLE FL 32209

Mailing Address

8300 COLLEGE BLVD  
ATTN: TAX DEPT  
OVERLAND PARK KS 66210-1841

3. Date Incorporated or Qualified

02/04/1994

3a. Date of Last Report

05/01/1996

2. Principal Place of Business

21 10245 Centurion Parkway,

Suite, Apt. #, etc.

22 North

City & State

23 Jacksonville, FL

Zip

24 32256

Country

25 USA

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number

13-3740791

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒

Yes

☐

No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
HARRIS, D. GEORGE  
STREET ADDRESS  
399 PARK AVE.  
CITY-ST-ZIP  
NEW YORK NY 10022

TITLE ☐ DELETE

NAME  
DONAHUE, RICHARD J  
STREET ADDRESS  
399 PARK AVE.  
CITY-ST-ZIP  
NEW YORK NY 10022

TITLE ☐ DELETE

NAME  
KILPATRICK, DONALD G  
STREET ADDRESS  
399 PARK AVE.  
CITY-ST-ZIP  
NEW YORK NY 10022

TITLE ☐ DELETE

NAME  
NICK, RICHARD J  
STREET ADDRESS  
399 PARK AVE.  
CITY-ST-ZIP  
NEW YORK NY 10022

TITLE ☐ DELETE

NAME  
PETROCELLI, ANTHONY J  
STREET ADDRESS  
399 PARK AVE.  
CITY-ST-ZIP  
NEW YORK NY 10022

TITLE ☐ DELETE

NAME  
LESTER, ROBERT M  
STREET ADDRESS  
8570 PHILLIPS HIGHWAY  
CITY-ST-ZIP  
JACKSONVILLE FL 32258-8208

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/97 (913) 344-9246

0483588

CR2E034 (9/96)