

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F94000001584 (1)

1. Corporation Name

ORR SAFETY CORPORATION



Principal Place of Business

2360 MILLERS LANE
LOUISVILLE KY 40216-5387
US

Mailing Address

PO BOX 436269
LOUISVILLE KY 40253-6269
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 P.O. Box 16-326
27 Suite, Apt. #, etc.

28 City & State

29 Louisville, KY

29 Zip

30 40253-6269

Country

3. Date Incorporated or Qualified
03/29/1994

3a. Date of Last Report
05/01/1995

4. FEI Number
61-0471256

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

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33234

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

Signature, typed or printed name of registered agent and fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PC
NAME ORR, CLARK
STREET ADDRESS 2360 MILLERS LANE
CITY - ST - ZIP LOUISVILLE KY ☐ DELETE

TITLE V
NAME GIBSON, C. BERNARD
STREET ADDRESS 2360 MILLERS LANE
CITY - ST - ZIP LOUISVILLE KY ☐ DELETE

TITLE S
NAME MATTINGLY, PATRICK W
STREET ADDRESS 2800 CITIZENS PLAZA
CITY - ST - ZIP LOUISVILLE KY 40202 ☐ DELETE

TITLE T
NAME ASH, ROBERT L
STREET ADDRESS 2360 MILLERS LANE
CITY - ST - ZIP LOUISVILLE KY ☐ DELETE

TITLE VC
NAME MADDOX, ROBERT L
STREET ADDRESS 2800 CITIZENS PLAZA
CITY - ST - ZIP LOUISVILLE KY 40202 ☐ DELETE

TITLE D
NAME PALMER, LEE
STREET ADDRESS N29W29682 FRANCISCAN ROAD (HEARTHSTONE)
CITY - ST - ZIP PEWAUKEE WI 53072 ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Assistant treasurer
1.2 NAME Gerald P. McDaniel
1.3 STREET ADDRESS 2360 Millers Lane
1.4 CITY - ST - ZIP Louisville, KY 40216 ☐ Change ☒ Addition

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

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

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GERALD P. McDANIEL, ASST. TREASURER

DATE

5/1/96

DAYTIME PHONE #

(502) 774-6561

CR2E034 (12/95)