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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sanora B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

1996

F9400001738 (3)

RICHARD SHAW COMPANY



Principal Place of Business Mailing Address 1905 SOUTH CAMPBELL 1935 SOUTH CAMPBELL SPRINGFIELD MO 65896 SPRINGFIELD MO 65898					I POUNTO THE IDIN BIRN BRIN 881	 	
					3. Date incorporated or Qualified 04/06/1994	3a. Date of Last Report 04/17/1995	
2. Principal Place of Business		2a. Mailing Address 26		4. FEI Number 43-1558989		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc	Suite, Apt. #, etc		5. Certificate of Status Desired		1.75 Additional Fee Required
City & State		City 8 State		6. Election Campaign Financing	\$	5.00 May Be	
23		28			Trust Fund Contribution		Idded to Fees
Ζφ 24	Country	<i>Ζ</i> φ 29	Countr 30	у	This corporation has liability for Florida Statutes	intang ble tax und s - 🔀 No	ler s. 199.032,
4	25 9. Name and Address of Curren		30		10. Name and Address of New I		t
	S. Harrie and readings of Control		8	Name			
AI DOIT	TON: I AWDENCE E					CIL COMPANY	
ALBRITTON, LAWRENCE E 2975 OVERSEAS HIGHWAY				Street Add	ress (P.O. Box Number is Not Accepta	DIE)	
	HON FL 33050		8:	5			
			84	City		85	Zip Code
				'	ration submits the statement for the pu	FL	
12. TITLE	Signature, types or printed have is registered agent OFFICERS AN		Note: Buy series Ag 13. 1 1 Total		ADDITIONS/CHANGES TO OF	DATE FICERS AND DIRI	*. * * * * * * * * * * * * * * * * * *
NAME	MORRIS, JOHN L		1.2 NAME				. –
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TITLE	V NENDY MADILYM CHE	/ HENRY, MARILYN SUE				[] (i.	angs [] Addition
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CITY-ST ZIP	SPRINGFIELD MO 65898		2.4 Cify				
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NAME	HODGES, JENNA		3.2 NAM				
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CITY - ST - ZIP	SPRINGFIELD MO 65898	DECETE	3.4 City				ange
TITLE	S Greene, Joe C	LI bectit	4 1 TITL 4 2 NAM				ang. [] (Monto
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NAME.			6.2 NAM	E! ADDRESS			
STREET ADDRESS	•		6.4 CITY				
CITY - ST - ZIP	<u> </u>		U410111		facility of the Cartina 11	0.0200 (IA Flack)	Challaton I further

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stritled 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 trusted 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/96

417-887-1915