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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9500000910 (8)

RAWLINGS SPORTING GOODS COMPANY, INC.

PO BOX 22000 PO BOX 22000 ST LOUIS MO 63126 ST LOUIS MO 63126-0090 3. Date Incorporated or Qualified 3a. Date of Last Report 02/23/1995 07/24/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 43-1674348 26 Not Applicable 21 Suite, Apt. #, ctc Suite, Apt. #. etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be \Box 23 28 Trust Fund Contribution Added to Fees Country Country Zip This corporation has liability for intangible tax under s. 199.032, ☐ Yes ☐ No 25 29 30 Florida Statutes 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name DONIKIAN, ROBERT 11430 N KENDALL DR., STE. 232 Street Address (P.O. Box Number is Not Acceptable) R2 MIAMI FL 33176 83 Zip Code A4 City 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Fiorida 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 femiliar with land accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE largerature, typed or printed name of registered agont and title if applicable (NOTE Registered Agent signature regulred when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS (96/6)13. 12. DELETE Change Addition 1.1 TITLE TITLE SHIELDS, CARL J CR2E034 NAM: 12 NAME 1859 INTERTECH DR. 1.3 STREET ADDRESS STREET ADDRESS FENTON MO 63026 1.4 CITY-ST-ZIP CITY-ST ZiP DELETE Change Addition 2.1 TITLE 70108 THOMPSON, J. MICHAEL 2.2 NAME

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3 1 1/11 E

3.2 NAME

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5.1 TITLE

5.2 NAME

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6.2 NAME

DELETE

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01Y 51-7P 64 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 changed, or on an attachment with an address. appears in Block 12 or BI

SIGNATURE:

NAME

DISE

NAME

THILE

MALA

TITLE

101.E

NAME STREET ADDRESS

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STREET ADDRESS.

CHY-51-769

041 ST 7IP

OBY-51 Z#

1859 INTERTECH DR.

KEENE, HOWARD B

FENTON MO 63026

1859 INTERTECH DR.

MARTIN, PAUL E.

SIZEMORE, TED C

FENTON MO 63026

1859 INTERTECH DR.

FENTON MO

1859 INTERTECH DR.

FENTON MO

CFO

Daytime Phone #

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FILED

Apr 23 1997 8:00am

Secretary of State