

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
May 08 1997 8:00am
Secretary of State

DOCUMENT # F96000001614

1. Corporation Name

BORDEN DECORATIVE PRODUCTS, INC.

Principal Place of Business

C/O BORDEN, INC. TAX DEPT.
180 E. BROAD ST 25TH FLOOR
COLUMBUS OH 43215

Mailing Address

C/O BORDEN, INC. TAX DEPT.
180 E. BROAD ST 25TH FLOOR
COLUMBUS OH 43215-3707

3. Date Incorporated or Qualified
3/29/96

3a. Date of Last Report

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

4. FEI Number

51-0370301

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

10. Name and Address of New Registered Agent

PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYES ST.
STE. 105
TALLAHASSEE FL 32301

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PRESIDENT ☐ DELETE
NAME IAN G. COLLINS
STREET ADDRESS BELGRAVE MILLS, BELGRAVE RD.
CITY-ST-ZIP DARWEN, LANCASHIRE U.K. BB3 2RR

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VICE PRESIDENT-FINANCE ☐ DELETE
NAME DENIS LEONG
STREET ADDRESS BELGRAVE MILLS, BELGRAVE RD.
CITY-ST-ZIP DARWEN, LANCASHIRE U.K. BB32RR

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

TITLE SECRETARY ☐ DELETE
NAME BENJAMIN H. JONES
STREET ADDRESS THE CEDARS, 2 HIGH ST.
CITY-ST-ZIP BAGSHOT, SURREY U.K. GU19 5AE

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

TITLE ASST. TREASURER ☐ DELETE
NAME LAWRENCE L. DIEKER
STREET ADDRESS 180 E. BROAD ST.
CITY-ST-ZIP COLUMBUS, OH 43215-3799

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

TITLE TREASURER ☐ DELETE
NAME RONALD P. STARKMAN
STREET ADDRESS 180 E. BROAD ST.
CITY-ST-ZIP COLUMBUS, OH 43215-3799

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

TITLE DIRECTOR ☐ DELETE
NAME IAN G. COLLINS
STREET ADDRESS BELGRAVE MILLS, BELGRAVE RD.
CITY-ST-ZIP DARWEN, LANCASHIRE U.K. BB3 2RR

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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***165.00

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

TREASURER 4/ /97 (614) 225-4479

Date

Daytime Phone #