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FILED  
May 05 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # F96000002678 (8)

1. Corporation Name

KINGSFORD MANUFACTURING COMPANY

Principal Place of Business

1221 BROADWAY  
OAKLAND CA 94612-1888

Mailing Address

ATTN: TAX DEPT.  
PO BOX 24305  
OAKLAND CA 94623  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/29/1996

4. FEI Number

94-3240524

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VD  
NAME AUSFAHL, WILLIAM F  
STREET ADDRESS 20 INDIAN WELLS  
CITY-ST-ZIP MORAGA CA ☒ DELETE

TITLE VS  
NAME CUTTER, E A  
STREET ADDRESS 1221 BROADWAY  
CITY-ST-ZIP OAKLAND CA ☒ DELETE

TITLE CD  
NAME JOHNSTON, GERALD E  
STREET ADDRESS 230 DORCHESTER LANE  
CITY-ST-ZIP ALAMO CA ☐ DELETE

TITLE V  
NAME HANSEN, RICHARD P  
STREET ADDRESS 28 VIA BARCELONA  
CITY-ST-ZIP MORAGA CA ☐ DELETE

TITLE V  
NAME BIEBL, ANTHONY W  
STREET ADDRESS 463 GREEN VIEW DR  
CITY-ST-ZIP WALNUT CREEK CA ☐ DELETE

TITLE T  
NAME ROSE, KAREN M  
STREET ADDRESS 239 MAGELLAN AVENUE  
CITY-ST-ZIP SAN FRANCISCO CA ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE T  
1.2 NAME HOUSE, S. D.  
1.3 STREET ADDRESS 1221 BROADWAY  
1.4 CITY-ST-ZIP OAKLAND, CA 94612 ☐ Change ☒ Addition

2.1 TITLE V/S/D  
2.2 NAME BEWLEY, P. D.  
2.3 STREET ADDRESS 1221 BROADWAY  
2.4 CITY-ST-ZIP OAKLAND, CA 94612 ☐ 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 V/D  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP ☒ Change ☐ Addition

14. I 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 a 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 as an attachment with an address.

SIGNATURE Richard P. Hansen, Vice President, 1/22/98, 510-231-3000

CR2E034 (10/97)