**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # F9600004369

1. Corporation Name

HODRING MANUFACTURING CORPORATION

Applied Place of Business  2. Principal Place of Business  2. Principal Place of Business  2. A Mailing Address  3. Date incognitude of Qualified  08/27/1996  3. Name Applied For  1. A FEI Number  4. REI Number  5. St. 75 Additional  City & State  2. Country  2. Do Country  3. St. 75 Additional  2. Do Country  3. Name and Address of Courtent Registered Agent  COPPORATION SETRICE COMPANY  1. Pursuant of the provisions of Sections 607 0502 and 607 1506. Florids States 1. St. Name  1. Pursuant of the provisions of Sections 607 0502 and 607 1506. Florids States 1. St. Name  1. Pursuant of the provisions of Sections 607 0502 and 607 1506. Florids States 1. St. Name  1. Pursuant of the provisions of Sections 607 0502 and 607 1506. Florids States 1. St. Name  1. Pursuant of the provisions of Sections 607 0502 and 607 1506. Florids States 1. St. Name  1. Pursuant of the provisions of Sections 607 0502 and 607 1506. Florids States 1. St. Name  2. OPPORTATION SETRICE COMPANY  1. Pursuant of the provisions of Sections 607 0502 and 607 1506. Florids States 1. St. Name  2. OPPORTATION SETRICE COMPANY  1. Pursuant of the provisions of Sections 607 0502 and 607 1506. Florids States 1. St. Name  2. OPPORTATION SETRICE COMPANY  1. Pursuant of the provisions of Sections 607 0502 and 607 1506. Florids States 1. St. Name  2. OPPORTATION SETRICE COMPANY  1. Pursuant of the provisions of Sections 607 0502 and 607 1506. Florids States 1. St. Name  2. OPPORTATION SETRICE COMPANY  1. Pursuant of the provisions of Sections 607 0502 and 607 1506. Florids States 1. St. Name  2. OPPORTATION SETRICE COMPANY  2. OPPORTATION SET	HOFNING	S WANDFACTORING COREC	DIATION					
EMPORIA KS 68801  120 HAYS ST TALLAMASSEE IT 23201  2. Principal Place of Business	Principal Place	e of Business	Mailing Address				43    00    01400 (	16 81110 1911 1601
2. Principal Place of Business   2a. Mailing Address   4. FEI Number   Applied For   A	428 PEYTON STREET C/O CORPORATION SERVICE CO EMPORIA KS 66801 1201 HAYS ST.			CO.		DO NOT WRITE IN	THIS SDACE	
2. Principal Place of Business   2a. Mailing Address   4. FEI Number   Applied For	TALLAHASSEE FL 32301							
2. Principal Place of Business   2a. Malling Address   4. FEI Number   Al-8.06/TSQ55   Not Applicable   Sultin, Apr. 8, nfc   28   Sultin, Apr. 8, nfc   28   Sultin, Apr. 8, nfc   27   City & State   City & Cit						· _		Į
Sulfa, April 2, Mr.   Sulfa, April 2, Mr.   Sulfa, April 2, Mr.   Sulfa, April 2, Mr.   Sulfa, April 3, Mr.   Sulfa, April 3, Mr.   Sulfa, April 3, Mr.   Sulfa, April 4, Mr.	<b>A</b> D : (D)		2s Moiling Addrson					Applied For
Sulfin, Apf. 9_mfn							<b>⊢</b>	
27   City & State   27   City & State   City & C	<u></u>					40 00/ 02/90		
Cry & State  Cry & State    Cry & State   Cr						5. Certificate of Status Desired		
Addition					6. Election Campaign Finan		\$5.00	0 May Be
Zip   Country   Zip   Country   B. This corporation owes the current year Intengible Personal Property Tax   Yes   No.	<b>一</b> 」 ´	<b>⊢</b> ′				7	,	
Personal Property Tax   Yes   No.		<u> </u>				8. This corporation owes the current ye	ar Intangible	
9. Name and Address of Gurrent Registered Agent  CORPORATION SERVICE COMPANY 1201 HAY'S STREET TALLAHASSEE FL 32301-2525  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Siabules, the above-named corporation submits this statement for the purpose of changing its registered agent. a manufacturity and accept the obligations of, Section 607.0505, Florida Siabules, the above-named corporation submits this statement for the purpose of changing its registered agent. a manufacturity that accept the obligations of, Section 607.0505, Florida Siabules, the above-named corporation submits this statement for the purpose of changing its registered agent. a manufacturity that accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  12. Name  PETERSON, THOMAS  13. TITLE  13. TITLE  13. TITLE  14. TITLE  15. TITLE	24			1				DA No
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525  83  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Slabutes, the above-mand corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent, are familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and the florida statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and the florida statutes and the florida statutes, and the florida statutes, and the florida statutes, and the florida statutes, and the florida statutes and the florida statutes, and the florida statutes, and the florida statutes	<del></del>					10. Name and Address of New Regist	ered Agent	
1201 HAYS STREET TALLAHASSEE FL 32301-2525  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 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, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE Signature, Typed of printed name of impaisance degree and at the inapplication.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE PETERSON, THOMAS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE PRAIRIE VILLAGE KS 66208  14. CITY-ST-2P  PRAIRIE VILLAGE KS 66208  1570 BURLINGAME ROAD  23. STREET ADDRESS  STREET ADDRESS  TITLE  S CHMPORIA KS  22. NAME  JANNING, JAMES  TO FORSYTH BLVD.  33. STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  ST. LOUIS MO 63105  1701 FORSYTH BLVD.  57. LOUIS MO 63105  TITLE  DVP  DELETE  ST. LOUIS MO 63105  TITLE  DVP  DELETE  STREET ADDRESS  ST. LOUIS MO 63105  TITLE  S ADDITIONS STREET ADDRESS  STREET ADDRESS  ST. LOUIS MO 63105  TITLE  S ADDITIONS STREET ADDRESS  ST. LOUIS MO 63105  TITLE  S ADDITIONS STREET ADDRESS  ST. LOUIS MO 63105  TITLE  S ADDITIONS STREET ADDRESS  ST. LOUIS MO 63105  TITLE  S ADDITIONS STREET ADDRESS  ST. LOUIS MO 63105  TITLE  S ADDITIONS ST. LOU		,		81	Name			
1201 HAYS STREET TALLAHASSEE FL 32301-2525  83  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, and accept the chilipations of, Section 607.0502, Florida Statutes.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE P D DELETE 11. TITLE VICE PRESENT.  12. OFFICERS AND DIRECTORS IN 12  TITLE P D DELETE 11. STREET ADDRESS IN 12. STREET ADDRESS IN 14. CITY-ST-2P  TITLE VCD D DELETE 2. TITLE VCC PRESIDENT VCC PRESI				82	Street A	Address (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Rordo Statutes, the above-named corporation submits this statement for the purpose of changing its 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, and accept the obligations of, Section 607.0505, Florida Statutes.    SIGNATURE				02	Circor	Address (F. C. Box Hamper to Her reception)		
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 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, and familiar with, and accept the obligations of, Section 607.0508, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS (MOTE Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS IN 12  TITLE PETERSON, THOMAS  12. NAME  PARAILE VILLAGE KS 66208  14. CMY-ST-JP  PRAIRIE VILLAGE KS 66208  14. CMY-ST-JP  PRAIRIE VILLAGE KS 66208  14. CMY-ST-JP  PRAIRIE VILLAGE KS 66208  15. THUE  PRINTING  PRINTIN	TALL	AHASSEE FL 32301-2525		83				
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SIGNATURE    Signature   Signature   State of Florida, Such change was authorized by the corporation's bloard of directors. Interest appointment as registered agent, and accept the obligations of, section 607/505, Florida Stateties.    Signature   Signature				64	City		FL   "   -	
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TITLE					it signature re	oquiled into it consumings		TORS IN 12
NAME		<del></del>			T			
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NAME   SCHMALZ, WILLIAM   4.2 NAME   4.3 STREET ADDRESS   7701 FORSYTH BLVD.   4.4 CITY-ST-ZIP   ST. LOUIS MO 63105   4.4 CITY-ST-ZIP   Change   Addition   Additio	_				, · <u> </u>	Director	Chang	e X Addition
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NAME HAMACHER, SAMUEL  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  HAMACHER, SAMUEL  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  6.1 TITLE  ASST. Secretary  Change  Addition  6.2 NAME  Elrabeth V. Bowling  6.3 CITY-ST-ZIP  Change  Addition			DELETE				Chang	e Addition
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DELETE 6.1 TITLE ASST. Sucretary Change Addition  TITLE  NAME  ASST. Sucretary  Elizabeth V. Bowling  CARRETT APPENDENCE  ASST. Sucretary  Elizabeth V. Bowling  CARRETT APPENDENCE  CARRETT APPENDENCE  CONTROL OF THE	1		· · · ·		-			
NAME  62 NAME  Elizabeth V. Bowling  CASTETT APOSSES  AMAL FACULT  BING. FLOOR		01. LOUID MO 60 103	☐ DELETE			Asst. Suretary	☐ Chang	e Addition
63 STREET ADDRESS 770 / FORSYth 81vd. \$100			<u>_</u>	6.2 NAME	Ì	Elizabeth V. Bowlina		<i>,</i> `
	STREET ADDRESS				T ADDRESS .	2701 Forsyth Blod. +600		

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 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, withall other like empowered.

**SIGNATURE:** 

314 727.5550

Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90133 030 \*\*\*150.00