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FILED  
May 15 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P02747 (4)

1. Corporation Name  
AKZO NOBEL COATINGS INC.

Principal Place of Business

C/O AKZO COATINGS INC.  
4730 CRITTENDEN DR  
LOUISVILLE KY 40209  
US

Mailing Address

C/O AKZO NOBEL INC. TAX DEPT  
300 S RIVERSIDE PLAZA  
CHICAGO IL 60606  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/18/1984

4. FEI Number

23-2127291

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$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

CT CORPORATION SYSTEM  
1200 S. 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

*William Weiss* Secretary

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

(NOTE: Registered Agent Signature required when reinstating)

DATE

4/4/98

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE  
NAME VAN KARNEBEEK, HERMAN  
STREET ADDRESS BEETHOVENLAAN 27  
CITY-ST-ZIP 1217 CH HILVERSUM NE

TITLE VP ☐ DELETE  
NAME TOBA, ROBERT J.  
STREET ADDRESS 1905 ARNOLD PALMER BLVD  
CITY-ST-ZIP LOUISVILLE KY

TITLE S ☐ DELETE  
NAME WEISS, WILLIAM O  
STREET ADDRESS 11 EVERGREEN ROW  
CITY-ST-ZIP ARMONK NY

TITLE VP ☐ DELETE  
NAME SCOLARO, PETER  
STREET ADDRESS 1413 PEBBLE RIDGE DRIVE  
CITY-ST-ZIP ROCHESTER MI

TITLE AS ☐ DELETE  
NAME NELSON, NATASHA  
STREET ADDRESS 4 MALLARD RUN  
CITY-ST-ZIP UPPER SADDLE NJ

TITLE D ☐ DELETE  
NAME GOLD, PETER S  
STREET ADDRESS 17 MANITOU RD  
CITY-ST-ZIP WESTPORT CT

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☐ Change ☒ Addition  
1.2 NAME OVE NATTSSON  
1.3 STREET ADDRESS VELPERWEG 76/ PO BOX 9300  
1.4 CITY-ST-ZIP 6800 SB ARNHEM, NETHERLANDS

2.1 TITLE VP ☒ Change ☐ Addition  
2.2 NAME TORBA, ROBERT J.  
2.3 STREET ADDRESS SAME  
2.4 CITY-ST-ZIP I

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

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

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

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

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.

SIGNATURE

*William Weiss*

6/4/98-5191

CR2E034 (10/97)