

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90246 036 ***150.00

DOCUMENT # P09832

1. Corporation Name

LIBBEY-OWENS-FORD CO.

Principal Place of Business

811 MADISON AVENUE
TOLEDO OH 43624-1626

Mailing Address

811 MADISON AVE.
P. O. BOX 799
TOLEDO OH 43697-0799
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/18/1986

4. FEI Number

34-1506654

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 the current year Intangible
Personal Property Tax.

☒ Yes ☐ No

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

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

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	PAP	<input checked="" type="checkbox"/> DELETE
NAME	SCHWABERO, MARK D	
STREET ADDRESS	1236 HAMILTON LANE	
CITY-ST-ZIP	NAPERVILLE IL 60540	
TITLE	PBP	<input type="checkbox"/> DELETE
NAME	KALOSIS, STEPHEN F	
STREET ADDRESS	5612 DIANNE COURT	
CITY-ST-ZIP	TOLEDO OH 43623	
TITLE	VS	<input checked="" type="checkbox"/> DELETE
NAME	MILLER, ALAN J.	
STREET ADDRESS	17 WALNUT CREEK	
CITY-ST-ZIP	HOLLAND OH	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	ALTMAN, RICHARD A	
STREET ADDRESS	2532 GUNN ROAD	
CITY-ST-ZIP	HOLLAND OH 43528	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	LALLI, MAURICIO P	
STREET ADDRESS	525 KITLOU COURT	
CITY-ST-ZIP	HOLLAND OH 43528	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	MCCREARY, WILLIAM N	
STREET ADDRESS	7307 WHISPERING OAKS	
CITY-ST-ZIP	SYLVANIA OH 43560	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

LIBBEY-OWENS-FORD CO.

OFFICERS

558118-40246-36
P09832

<u>Name</u>	<u>Title</u>	<u>Home Address</u>
Warren D. Knowlton	Chairman of the Board President-Auto Products Division N. America	29709 Somerset Perrysburg, Ohio 43551
Stephen F. Kalosis	President - Building Products	5612 Dianne Court Toledo, Ohio 43623
Anthony R. Clark	Vice President	444 East Front St. Perrysburg, OH 43551
Richard B. Degener	Vice President	2021 Holloway Road Holland, Ohio 43528
Richard A. Altman	Vice President	2532 Gunn Road Holland, OH 43528
Norm R. Market	Vice President	7602 Wind River Sylvania, Ohio 43560
William N. McCreary	Vice President	7307 Whispering Oaks Sylvania, Ohio 43560
Byron D. Quandt	Vice President	3758 Edgevale Toledo, Ohio 43606
Stephen L. Rudd	Vice President	5838 Torrey Pines Columbus, Ohio 43082
Anthony R. Shaw	Vice President	26142 Edinborough Ct. Perrysburg, Ohio 43551
David W. Hilton	Vice President	811 Madison Avenue Toledo, Ohio 43697
James A. Ehle	Vice President	8939 Sandridge Drive Holland, Ohio 43528
Alan R. Graham	Vice-President General Counsel Secretary	2262 Innisbrook Toledo, Ohio 43606
Richard L. Berry, Jr.	Assistant Secretary	4421 Bonnie Brook Rd. Toledo, Ohio 43606
Gerard M. Gray	Chief Financial Officer	7405 Nightengale, #6 Holland, Ohio 43528
Jeffrey T. Bowman	Controller	3053 Shoreland Toledo, Ohio 43611