

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

FILED

May 13 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P11775 (4)
1. Corporation Name
OLNEY PAINT COMPANY



Principal Place of Business
PO BOX 1172
SPARTANBURG SC 29304

Mailing Address
PO BOX 1172
SPARTANBURG SC 29304

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/13/1986

4. FEI Number

57-0402405

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.

23 City & State

24 Zip

Country

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 VP
NAME KNIGHT, DOUGLAS E.
STREET ADDRESS 609 WILSON FERRY RD.
CITY-ST-ZIP MOORE SC

☐ DELETE

TITLE PTD
NAME DODSON, B. LEORY
STREET ADDRESS 128 LAKELAND AVE.
CITY-ST-ZIP MOORE SC

☐ DELETE

TITLE D
NAME DODSON, RANDALL H.
STREET ADDRESS 113 S. POINTE COURT
CITY-ST-ZIP MOORE SC

☒ DELETE

TITLE VPSD
NAME RING, CLYDE R.
STREET ADDRESS 143 WEST WOODGLEN RD.
CITY-ST-ZIP SPARTANBURG SC

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VP
1.2 NAME John D. Hudgins Jr
1.3 STREET ADDRESS 420 E. Constance St
1.4 CITY-ST-ZIP Columbus NC 28702

☐ Change ☒ Addition

2.1 TITLE Treasurer
2.2 NAME E. Fort Wolfe Jr
2.3 STREET ADDRESS 2701 Hwy 56
2.4 CITY-ST-ZIP Pauline SC 29374

☐ Change ☒ Addition

3.1 TITLE Secretary
3.2 NAME Calch Fort
3.3 STREET ADDRESS 2701 Hwy 56
3.4 CITY-ST-ZIP Pauline SC 29374

☐ Change ☒ Addition

4.1 TITLE CEO
4.2 NAME Mitch Jolley
4.3 STREET ADDRESS 2701 Hwy 56
4.4 CITY-ST-ZIP Pauline SC 29374

☐ Change ☒ Addition

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

☐ Change ☐ Addition

6.1 TITLE
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 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

CR2E034 (10/97)