FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR -7 AM 4:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P14850** **(2)**

1. Corporation Name
BARRON INDUSTRIES, INC.

Principal Place of Business	Mailing Address
105 19TH STREET S. IRONDALE AL 35210	105 19TH STREET S. IRONDALE AL 35210

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
06/16/1987	04/29/1994

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

4. FEI Number **63-0949364** ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	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 restating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	11 TITLE	☐ Change ☐ Addition
NAME	BLONDELL, E.J.	12 NAME	
STREET ADDRESS	661 MANOR COURT	13 STREET ADDRESS	
CITY-ST-ZIP	DESPLAINES IL	14 CITY-ST-ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	JOHNSON, M., H.	22 NAME	
STREET ADDRESS	7080 BEAR CREEK RD	23 STREET ADDRESS	
CITY-ST-ZIP	STERRETT AL	24 CITY-ST-ZIP	
TITLE	VD	31 TITLE	☐ Change ☐ Addition
NAME	BENNER, B.L.	32 NAME	
STREET ADDRESS	1289 BRANCHWATER LANE	33 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM AL	34 CITY-ST-ZIP	
TITLE	S	41 TITLE	☐ Change ☐ Addition
NAME	MCGRATH, JAMES J.	42 NAME	
STREET ADDRESS	15516 S. LINDEN	43 STREET ADDRESS	
CITY-ST-ZIP	OAK FOREST IL	44 CITY-ST-ZIP	
TITLE	CD	51 TITLE	☒ Change ☐ Addition
NAME	ANDERS, JOHN	52 NAME	D
STREET ADDRESS	907 E. 20TH ST.	53 STREET ADDRESS	Murry, David B.
CITY-ST-ZIP	LAPORTE IN	54 CITY-ST-ZIP	105 19th St. South Birmingham, AL 35210
TITLE		61 TITLE	☐ Change ☒ Addition
NAME		62 NAME	D
STREET ADDRESS		63 STREET ADDRESS	Mark, J. E.
CITY-ST-ZIP		64 CITY-ST-ZIP	105 19th St. South Birmingham, AL 35210

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Barry L. Bonner Barry L. Bonner 3/15/95 (205) 956-3441
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

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