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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P16604

(1)

ELECTROLUX CORPORATION

Principal Place of Business Mailing Address				I BORREDRE ROL HAND OURSE BRUIK DANN BUDA BROKE DERLE BOOK OLOK OKOK OKOK KOOK		
2300 WINDY RIDGE PARKWAY ATLANTA GA 30339 2300 WINDY RIDGE PARKY ATLANTA GA 30339 2665						
					3. Date Incorporated or Qualified 10/30/1987	3a. Date of Last Report 03/21/1996
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21	44 - 1-	26			06-1215988	Not Applicable
Suite, Apt		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	e	City & State			6. Election Campaign Financing	\$5.00 May Be
23	Country	28	Country		Trust Fund Contribution	Added to Fees
Zip	25)	Z(p 29	30	,	8. This corporation has liability for i	ntangible tax under s. 199.032, Yes No
24	g. Name and Address of Curren		30		10. Name and Address of New Re	
COR	PORATION SERVICE COMPANY		81	Name		i
1201	HAYES STREET		82	Street Ado	dress (P.O. Box Number is Not Acceptab	ıle)
TALL	AHASSEE FL 32301		83			
			84	City		- 85 Zip Code
			04	City		FL 85 Zip Code
office or n agent. Lai	to the provisions of Sections 607 050 egistered agent, or both, in the State in familiar with, and accept the obliga	2 and 607,1508, Florida Stati of Florida Such change was ations of, Section 607,0505, F	utes, the abov s authorized by Florida Statute	e-named cor y the corpora s.	poration submits this statement for the pation's board of directors. I hereby acception	urpose of changing its registered at the appointment as registered
SIGNATURE	Signation. Typedici policid har elef registered age	ent and tile Lappicable (NO	OTE: Registered Ag	eni signature requ	iired when reinstaling)	DATE
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFIC	
Mil.	PD	☐ DELETE	1.1 TITLE	ļ		Change Addition
Name	ALBANI, THOMAS J		1.2 NAME			
STSEEL ADORESS	2300 WINDY RIDGE #900			ADDRESS		
City St Zil	ATLANTA GA 30339 S	DELETE	1.4 CITY-5 2.1 TITLE	ST-21P		Change Addition
TITLE	COOPER,STEVEN D.	□ Detter	2.2 NAME			CT Olimide CT Magram
NAME STREET ADDRESS	2300 WINDY RIDGE #900		2.3 STREE	ADDRESS		
CHY ST-ZIP	ATLANTA GA 30339		2.3 STREE 2 4 CITY-	ł		
TITE	VCEP	DELETE	3 1 TITLE	31-211		Change Addition
NAME	HORIGAN, JOHN A		3.2 NAME			1
STREET ADDRESS	2300 WINDY RIDGE #900		33 STREE	ADDRESS		
COTY - ST_ZIP	ATLANTA GA 30339		3.4. CITY-	ST-ZIP		
TILLE	VP/T	DELETE	4 1 TITLE			☐ Change ☐ Addition
NAME	SCHWARTZ, EDMUND J		4. 2 NAME	Ī		
STREET ADDRESS	2300 WINDY RIDGE 900	•	4.3 STREE	T ADDRESS		· ·
City-St-7-2	ATLANTA GA 30339	Print	4.4 CITY -	ST - ZIP		[] AL [] LOUR
tifuf	D COMBELIAN C CTCMEN	DELETE	5.1 T(TLE			Change Addition
NAME Marie A Defendance	MCMILLIAN, C STEVEN THREE FIRST NATIONAL PL		5.2 NAME	r annarco		
STREET ADDRESS	CHICAGO IL 60602			T ADDRESS		
City-SF ZiP TifeE	D	DELETE	54 CITY~: 6.1 TITLE	DI - CH'		Change Addition
NAM	GILLFILLAN, MICHAEL	tund see to the	6.2 NAME			
STALL* ADDRESS	420 MONTGOMERY STREET,	12TH FLOOR		T ADDRESS		
Offy-S1-7iP	SAN FRANCISCO CA 94163		6.4 CITY -			
14. Loo here:	by certify that the information supplie	d with this filing does not qua	alify for the exi	emption state	ed in Section 119.07(3)(i), Florida Statute	s. I further certify that the
informatic Lam an c	on inclicated on this armual report or softicer or director of the corporation of the cor	supplemental annual report is the receiver or trustee emport	s true and acc owered to execute	urate and tha cute this repo	at my signature shall have the same lega ort as required by Chapter 607, Florida S	пепест as it made under oath; that statutes; and that my name

SIGNATURE:

appears in Block 12 or Block 13 if changed,

ar on an attachment with an address.

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Apr 10 1997 8:00am

Secretary of State

0012251