FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

1-3

DOCUMENT # **P19621** **(2)**

1. Corporation Name

WILSONART INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
600 GENERAL BRUCE DRIVE TEMPLE TX 76504	1717 DEERFIELD RD. DEERFIELD IL 60015 US

3. Date Incorporated or Qualified: 06/13/1988	3a. Date of Last Report: 05/01/1995
4. FEI Number: 36-3578230	☐ 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	

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 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

C T CORPORATION SYTEM
1200 SOUTH 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			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS ROEHLK, THOMAS M. 1717 DEERFIELD ROAD DEERFIELD IL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V COSTIGAN, JOHN M. 1717 DEERFIELD ROAD DEERFIELD IL	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BATTS, WARREN L. 1717 DEERFIELD ROAD DEERFIELD IL	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P DILLON, BOBBY D 600 GENERAL BRUCE DR TEMPLE TX	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☒ Addition AT Carl E. Johnson 1717 Deerfield Rd. Deerfield, Il. 60015
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BROWN, ROGER 600 GENERAL BRUCE DR TEMPLE TX	☒ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☒ Addition V L. John Fletcher 1717 Deerfield Rd. Deerfield, Il. 60015
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P REEB, WILLIAM R 600 GENERAL BRUCE DR. TEMPLE TX	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (12/95)

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)(k), 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: [signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **VICE PRESIDENT** 4-24-96 Date 847-495-6000 Daytime Phone #

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PREMARK INTERNATIONAL, INC.
TAX DEPARTMENT
1717 DEERFIELD ROAD
DEERFIELD, ILLINOIS 60015

05/01/96

DIVISION OF CORPORATIONS
P.O. BOX 1500

TALLAHASSEE FL 32302-1500

RE: TAXPAYER : WILSONART INTERNATIONAL,INC.
FED. I.D. NO. : 36-3578230
TYPE OF TAX : Annual Report
LIABILITY YEAR : 96
TYPE OF PAYMENT : Return
AMOUNT : 200.00

GENTLEMEN OR MADAM:

ENCLOSED WITHIN IS THE RETURN AND/OR PAYMENT INDICATED ABOVE FOR THE SUBJECT TAXPAYER.

KINDLY ACKNOWLEDGE RECEIPT OF THE ENCLOSED BY PLACING YOUR OFFICIAL STAMP ON THE DUPLICATE COPY OF THIS LETTER AND RETURNING SAME TO OUR OFFICE.

VERY TRULY YOURS,

PATRICIA A. THOMPSON
DIRECTOR, STATE TAXES

3-3

PREMARK INTERNATIONAL, INC.
TAX DEPARTMENT
1717 DEERFIELD ROAD
DEERFIELD, ILLINOIS 60015

05/01/96

DIVISION OF CORPORATIONS
P.O. BOX 1500

TALLAHASSEE FL 32302-1500

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