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

DOCUMENT # **P22483** **(2)**

1. Corporation Name

INDUSTRIALS CARBONS, INC.

Principal Place of Business
900 ASHWOOD PARKWAY
SUITE 800
ATLANTA GA 30338

Mailing Address
900 ASHWOOD PARKWAY
SUITE 800
ATLANTA GA 30338

3. Date Incorporated or Qualified: 12/30/1988
3a. Date of Last Report: 01/20/1995

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip 24 Country 25

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip 29 Country 30

4. FEI Number: 43-1181674 — 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**

AUBIN, F. GENE
2897 WEST CYPRESS DRIVE
DUNNELLON FL 32630

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 of a member or agent (Either of the above officers or registered agent) (NOTE: Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS

TITLE	PTD	☐ DELETE
NAME	KEETER, DAREN M.	
STREET ADDRESS	545 CALAVERAS	
CITY-ST-ZIP	ATLANTA GA	
TITLE	VD	☐ DELETE
NAME	KEETER, STEVEN J.	
STREET ADDRESS	235 HUNTER VIEW	
CITY-ST-ZIP	ROSWELL GA	
TITLE	S	☐ DELETE
NAME	CANTWELL, CLAY	
STREET ADDRESS	115 WEST ATLANTICE	
CITY-ST-ZIP	BRANSON MO	
TITLE	D	☐ DELETE
NAME	CAREY, ROBERT G.	
STREET ADDRESS	2702 CHIMNEY SPRINGS DR	
CITY-ST-ZIP	MARIETTA GA	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☒ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS	1821 VERMACK COURT	
1.4 CITY-ST-ZIP	DUNWOODY GA 30328	30328
2.1 TITLE		☐ Change ☒ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		30075
3.1 TITLE		☐ Change ☒ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		65616
4.1 TITLE		☐ Change ☒ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		30062
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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: Robert G. Carey ROBERT G. CAREY 1/15/96 (770)393-1430
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #