

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**APPROVED
AND
FILED**

95 MAY -1 AM 5:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **P22838**

(7)

1. Corporation Name:

WEATHERLINE, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

12119 ST. CHARLES ROCK RD.
ST. LOUIS MO 63044-2602

12119 ST. CHARLES ROCK RD.
ST. LOUIS MO 63044-2602

3. Date Incorporated or Qualified

02/01/1989

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

43-0925362

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

City & State

City & State

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

Zip

Country

Zip

Country

24

25

29

30

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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
FIRST FLORIDA BANK BLDG., #420
TALLAHASSEE FL 32301

*This is address
of registered agent
as reported last
year!*

81 Name

Prentice Hall Corporation System Inc.

82 Street Address (P.O. Box Number is Not Acceptable)

1201 Hayes St.

83

Suite 105

84 City

Tallahassee

FL

85 Zip Code

32301

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

(Registered Agent Signature Required When Changing Registered Agent)

(Registered Agent Signature Required When Changing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: **PTD**
NAME: **FRIEDMAN, RICHARD H.**
STREET ADDRESS: **12119 ST CHARLES ROCK RD**
CITY, ST, ZIP: **ST. LOUIS MO**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY, ST, ZIP

TITLE: **VSD**
NAME: **FRIEDMAN, NANCY J.**
STREET ADDRESS: **12119 ST CHARLES ROCK RD**
CITY, ST, ZIP: **ST. LOUIS MO**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP

TITLE:
NAME:
STREET ADDRESS:
CITY, ST, ZIP:

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP

TITLE:
NAME:
STREET ADDRESS:
CITY, ST, ZIP:

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP

TITLE:
NAME:
STREET ADDRESS:
CITY, ST, ZIP:

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP

TITLE:
NAME:
STREET ADDRESS:
CITY, ST, ZIP:

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.077(3)(a), 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. 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:

Michelle Parent

(Signature and Typed or Printed Name of Signing Officer or Director)

5-1-95 (314) 341-1000

Date

Exhibit Number