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FILED  
Apr 25 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P33326 (0)

1. Corporation Name

KNOLL NORTH AMERICA, INC. KNOLL, INC.

N/C 5/02/97

Principal Place of Business

P.O. BOX 157  
EAST GREENVILLE PA 18041

Mailing Address

P.O. BOX 157  
EAST GREENVILLE PA 18041-0157



3. Date Incorporated or Qualified

03/27/1991

3a. Date of Last Report

04/23/1996

4. FEI Number

25-1648603

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

21 1235 Water Street

Suite, Apt. #, etc.

22 --

City & State

23 East Greenville, PA

Zip

24 18041

Country

25 U.S.A.

2a. Mailing Address

26 1235 Water Street

Suite, Apt. #, etc.

27 --

City & State

28 East Greenville, PA

Zip

29 18041

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
C/O CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
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

TITLE ☐ DELETE

C  
NAME STANJAR, B.B.  
STREET ADDRESS 1235 WATER ST.  
CITY-ST-ZIP E. GREENVILLE PA 18041

TITLE ☐ DELETE

V  
NAME LYNCH, J.  
STREET ADDRESS 1235 WATER ST.  
CITY-ST-ZIP EAST GREENVILLE PA 18041

TITLE ☐ DELETE

VP  
NAME MCCABE, B.  
STREET ADDRESS 1235 WATER ST.  
CITY-ST-ZIP EAST GREENVILLE PA 18041

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

1.4 CITY-ST-ZIP

2.1 TITLE P, CEO

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

VP, S  
Patrick A. Milberger  
1235 Water Street  
East Greenville, PA 18041

Sr.V.P., CFO  
Douglas J. Purdom  
1235 Water Street  
East Greenville, PA 18041

14. I do hereby certify that the information supplied with this filing 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. McCabe

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/97

Date

215-679-1301

Days & Place #

0498438

CR2E034 (9/96)

VBK dep 7/65