2001 UNIFORM BUSINESS REPORT (UBR)

Apr 11, 2001 8:00 am Secretary of State **DOCUMENT # P34589** 04-11-2001 90010 007 ***150.00 SIMMONS OUTDOOR CORPORATION Principal Place of Business Mailing Address SIMMONS OUTDOOR CORPORATION BLOUNT, INC $\mathbf{U} \approx \mathbf{U} + \mathbf{0}$ of 201 PLANTATION OAK DR 4520 EXECUTIVE PARK DR THOMASVILLE GA 31792 MONTGOMERY AL 36116 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0272347 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired-6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE ______Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10, Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Change CR2E034 (10/00) ■ Addition Delete TITLE TITLE NAME NAME BARSETT, GERALD W STREET ADDRESS STREET ADDRESS 15450 S OUTER FORTY RD STE 135 CITY-ST-ZIP CITY-ST-ZIP CHESTERFIELD MO 63017 **X** Delete ☐ Change ☐ Addition TITLE TITI F NAME MCINNES, JOSEPH NAME STREET ADDRESS STREET ADDRESS 4520 EXECUTIVE PARK DR -CITY-ST-ZIP CITY-ST-ZIP MONTGOMERY-ALERA ---☐ Addition TITLE ☐ Delete TITLE NAME NAME PANETTIERE, JOHN M STREET ADDRESS STREET ADDRESS 4520 EXECUTIVE PARK DR CITY-ST-ZIP CITY-ST-ZIP MONTGOMERY AL TITLE ☐ Delete TITLE Change ☐ Addition IRVING, RICHARD H III NAME 4520 EXECUTIVE PARK DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP <u>Montgomery al</u> ☐ Change TITLE ☐ Delete TITLE Addition NAME NAME LAYMAN, HAROLD E STREET ADDRESS STREET ADDRESS 4520 EXECUTIVE PARK DR

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Delete

SIGNATURE

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS MONTGOMERY AL

SIGNATURE AND PED OF PRINTED NAME OF SIGNING OF

4/6/01

Blankenship, Rodney W. 4520 Executive AWK Drive

Montgomery, AL 36116

(334) 236-8549

Daytime Phone #

☐ Change

X Addition