

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Mr. Michael Stickles
 Plant Manager
 Merillat Corporation
 1300 Southwest 38th Avenue
 Ocala, FL 34474

2. Article Number (Copy from service label)
 7099 3220 0003 6189 5297

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) Leah Dodge B. Date of Delivery 11/10/04

C. Signature Leah Dodge Agent
 Addressee

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

**U.S. Postal Service
 CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)**

Article Sent To:

7099 3220 0003 6189 5297

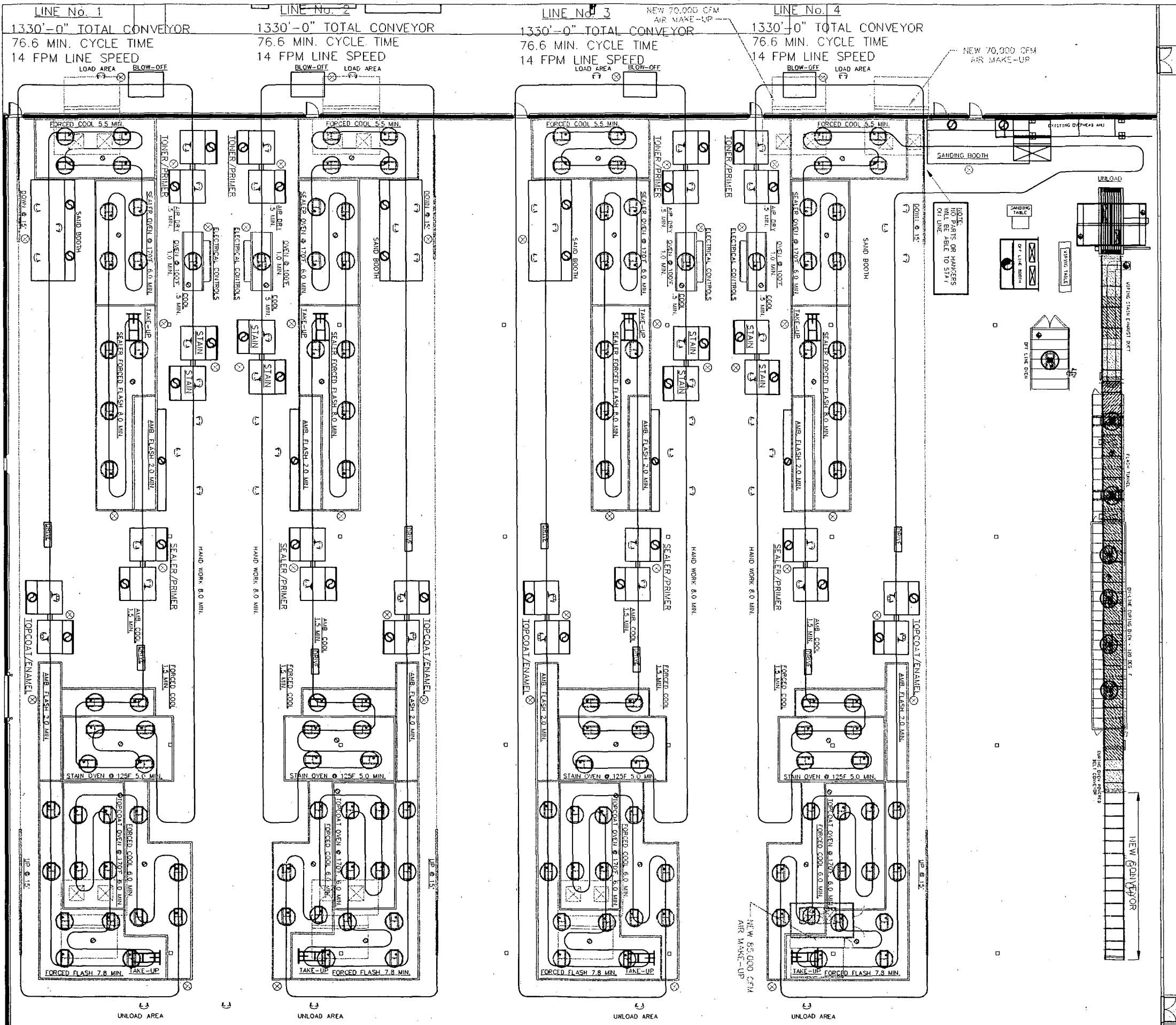
Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Name (Please Print Clearly) (To be completed by mailer)
Mr. Michael Stickels, Merillat Corp.
 Street, Apt. No.; or PO Box No.
1300 Southwest 38th Ave.
 City, State, ZIP+4
Ocala, FL 34474

PS Form 3800, July 1999

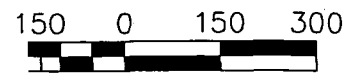
See Reverse for Instructions

FIGURE I-2



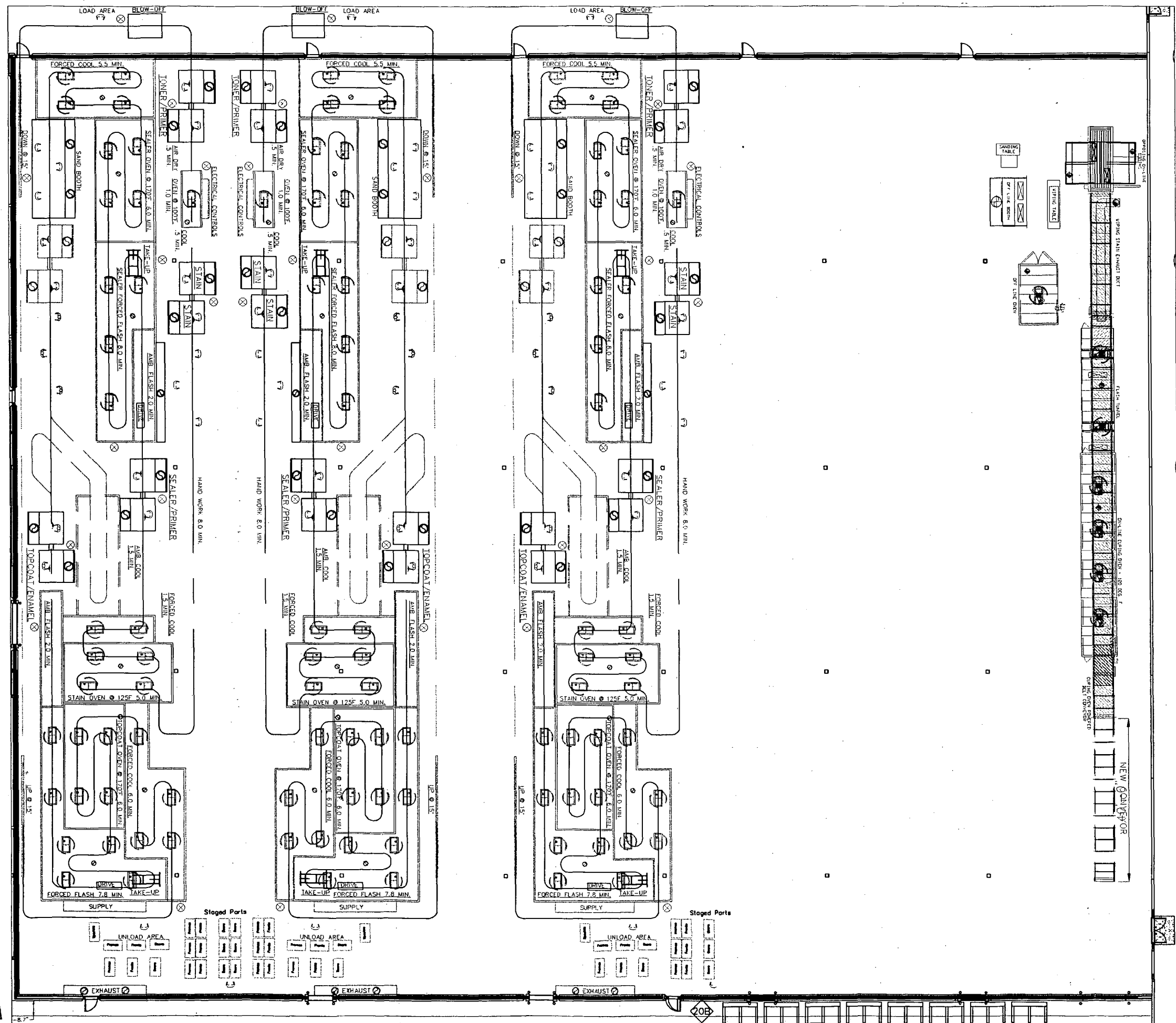
**MALCOLM
PIRNIE**

JANUARY 2005
EXPANDED FINISHING SYSTEM

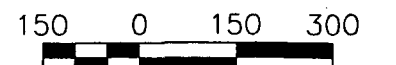


SCALE: 1" = 300'

FIGURE I-1



JANUARY 2005
 CURRENT FINISHING SYSTEM



SCALE: 1" = 300'

XREFS: IMAGES: None



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mr. Michael Stickles, Plant Manager
 Merillat Corporation
 1300 Southwest 38th Avenue
 Ocala, Florida 34474

2. Article Number
 (Transfer from service label)

7000 1670 0013 3109 9427

COMPLETE THIS SECTION ON DELIVERY

A. Signature Addressee Agent

B. Received by (Printed Name) Date of Delivery

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

**U.S. Postal Service
 CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)**

OFFICIAL USE

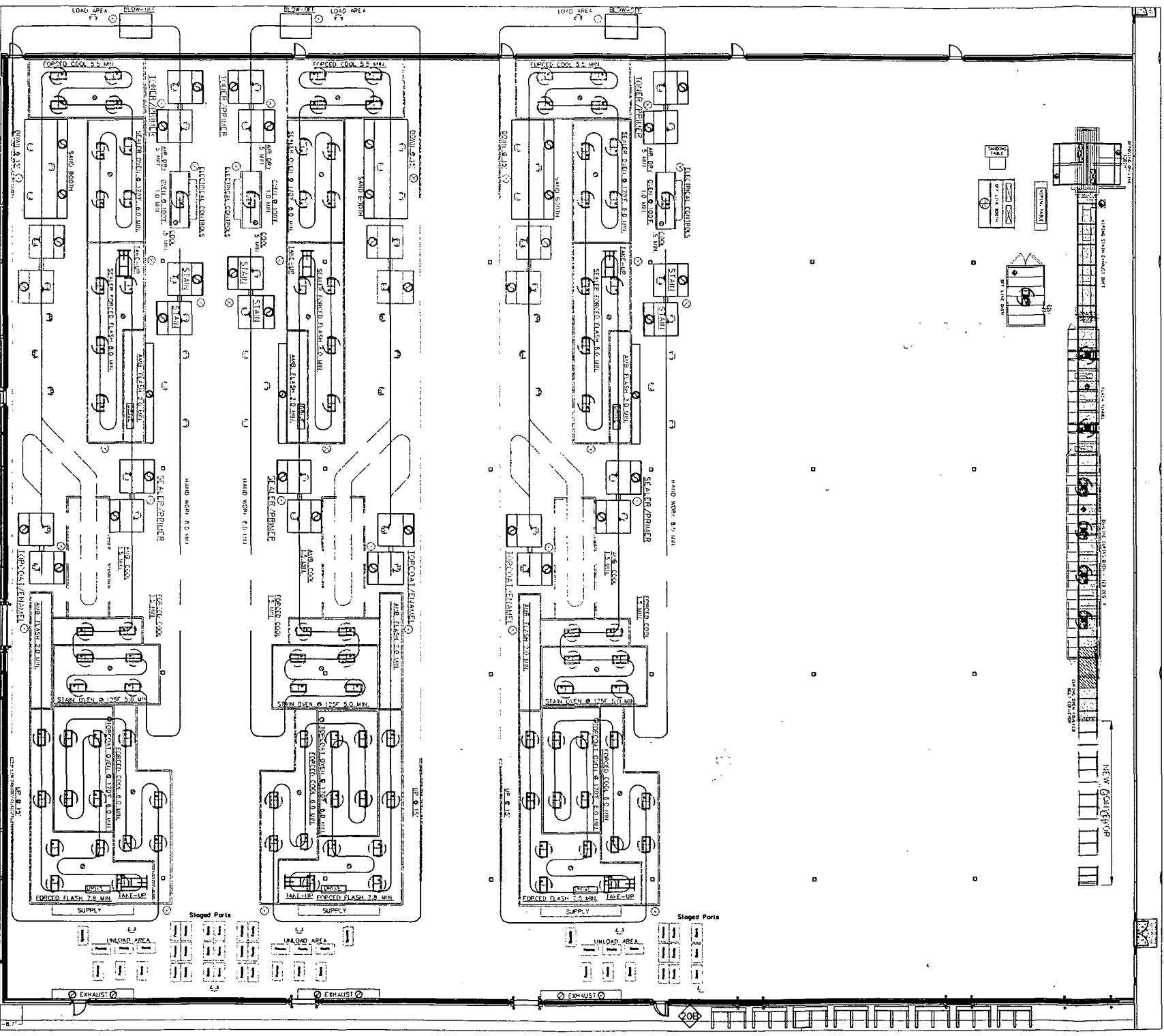
7000 1670 0013 3109 9427

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Tot	

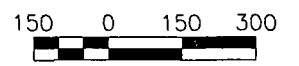
Postmark
 Here

Sent Mr. Michael Stickles, Plant Manager
 Street Merillat Corporation
 1300 Southwest 38th Avenue
 City Ocala, Florida 34474

FIGURE I-1



JANUARY 2005
 CURRENT FINISHING SYSTEM

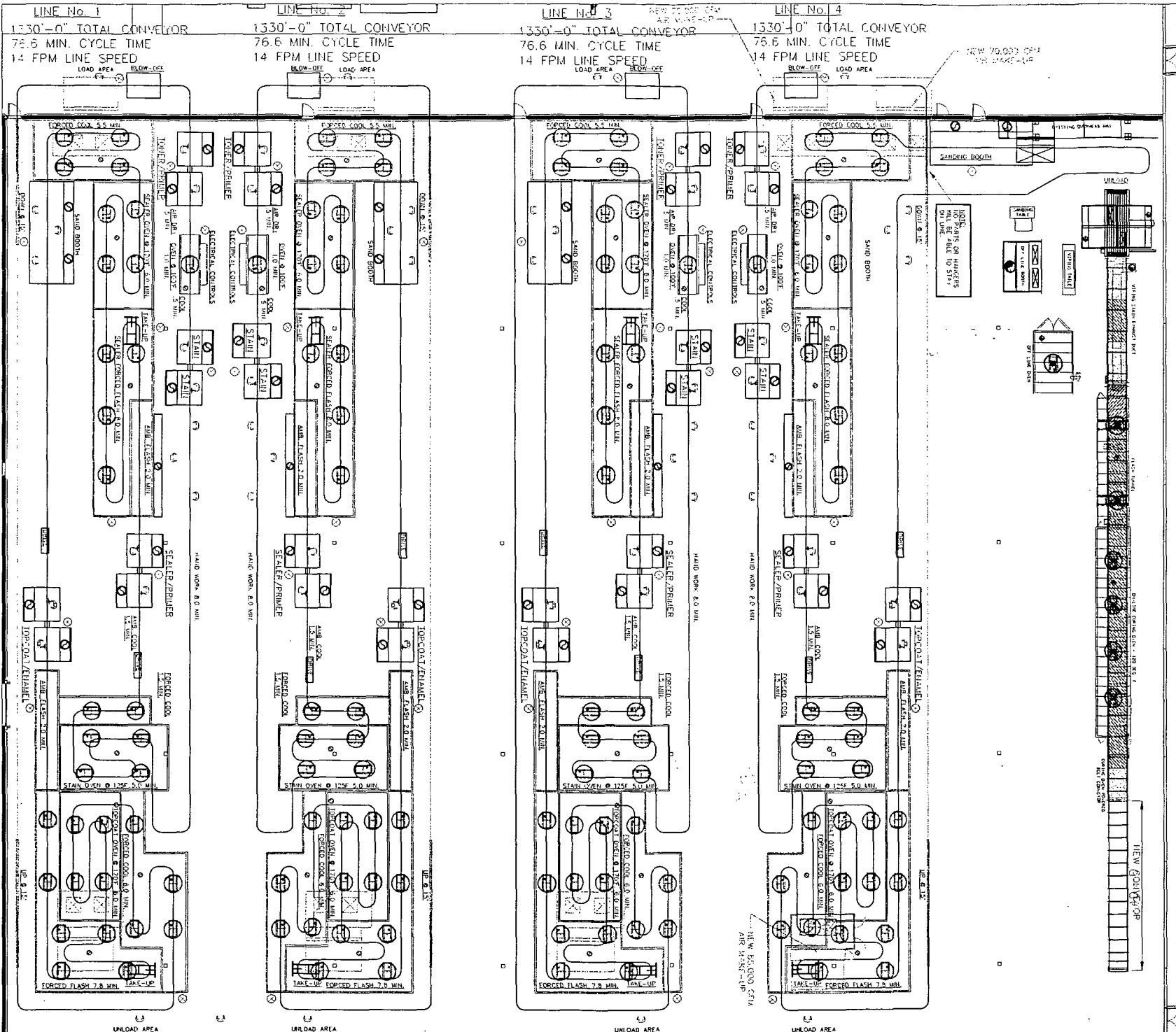


SCALE: 1" = 300'

XREFS: IMAGES: None

**MALCOLM
 PIRNIE**

FIGURE I-2



JANUARY 2005
 EXPANDED FINISHING SYSTEM
 150 0 150 300
 SCALE: 1" = 300'