


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 28, 2005 8:00 am**  
**Secretary of State**

02-28-2005 90222 006 \*\*\*150.00

**DOCUMENT # 809789**  
 1. Entity Name  
**MANUFACTURERS EQUIPMENT COMPANY**



Principal Place of Business <b>STRAUCH, NANCY</b> <b>1313 SANDERLING ISLAND</b> <b>POINT RICHMOND, CA 94801 US</b>	Mailing Address <b>FRIEDMAN, MICHAEL</b> <b>6256 N BAY RIDGE AVE</b> <b>MILWAUKEE, WI 53217 US</b>
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01162005 No Chg-P CR2E034 (10/03)

4. FEI Number <b>39-0731898</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
**CT CORPORATION SYSTEM**  
**1200 S. PINE ISLAND ROAD**  
**PLANTATION, FL 33324**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD WAKEMAN, FREDERIC E 1343 SANDERLING ISLAND 105 Hurlingham Rd POINT RICHMOND, CA London, SW6 3NU England
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD PETRIE, JAMES R. 111 E. WISCONSIN AVE MILWAUKEE, WI
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD STRAUCH, NANCY 1313 SANDERLING ISLAND POINT RICHMOND, CA
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

12: 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Nancy Strauch **2-20-05** (510)237-5021  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #