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95 MAY -1 AM 5:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT
1995

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

DOCUMENT # **820713** **(6)**

1. Corporation Name
DURAMAX, INC.

Principal Place of Business	Mailing Address
16025 JOHNSON STREET MIDDLEFIELD OHIO 44062	16025 JOHNSON STREET MIDDLEFIELD OHIO 44062

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
09/08/1967	05/01/1994

2. Principal Place of Business (21)	2a. Mailing Address (26)	4. FEI Number	Applied For / Not Applicable
		34-0317950	
Suite, Apt. # or Bldg. (22)	Suite, Apt. # or Bldg. (27)	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
City & State (23)	City & State (28)	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
Zip (24) / County (25)	Zip (29) / County (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
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	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 Section(s) 607.1907 and/or 617.1908 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

12. OFFICER AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN '95
TITLE	PD	☐ Change ☐ Addition
NAME	MILLER, PAUL C JR	
STREET ADDRESS	16025 JOHNSON STREET	
CITY-ST-ZIP	MIDDLEFIELD OH	
TITLE	S	☐ Change ☐ Addition
NAME	OLIVER, JAMES P	
STREET ADDRESS	16025 JOHNSON STREET	
CITY-ST-ZIP	MIDDLEFIELD OH	
TITLE	AT	☐ Change ☐ Addition
NAME	PERDAN, RUDY	
STREET ADDRESS	16025 JOHNSON ST.	
CITY-ST-ZIP	MIDDLEFIELD OH	
TITLE	D	☐ Change ☐ Addition
NAME	MILLER, PAUL C.	
STREET ADDRESS	16025 JOHNSON ST.	
CITY-ST-ZIP	MIDDLEFIELD OH	
TITLE	D	☐ Change ☐ Addition
NAME	PROCTOR, STANLEY M.	
STREET ADDRESS	2016 MIDWAY DRIVE	
CITY-ST-ZIP	TWINSBURG OH	
TITLE	VP	☐ Change ☐ Addition
NAME	LASKO, EDWARD J	
STREET ADDRESS	16025 JOHNSON ST	
CITY-ST-ZIP	MIDDLEFIELD OH	

14. I do hereby certify that the information supplied with this report is voluntarily furnished and 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 13A (if applicable) on an attachment with an address.

SIGNATURE: R.J. Perdan 5/1/95 216-632-1611
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
R.J. PERDAN Assistant Treas. x 224

0470720 FP

D
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D
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D
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D

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