FILED

2001 UNIFORM BUSINESS REPORT (UBR)

May 03, 2001 8:00 am Secretary of State **DOCUMENT # 829859** 1. Entity Name **BALDOR ELECTRIC COMPANY** 5-03-2001 90932 028 ***150.00 Principal Place of Business Mailing Address 5711 RS BOREHAM, JR ST 5711 RS BOREHAM, JR ST FT SMITH AR 72902 FT SMITH AR 72902 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 43-0168840 Not Applicable Zip Country Zip Country \$8.75 Additional .5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD 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 Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Delete TITLE TITLE Change HAYEDORN, GENE J NAME NAME STREET ADDRESS STREET ADDRESS 2630 ENID PLACE CITY-ST-ZIP CITY-ST-ZIP FORT SMITH AR 72901 TITLE ☐ Change ☐ Addition ☐ Delete TITLE QUALLS, R. L. NAME NAME 2407 GREEN RIDGE DR. STREET ADDRESS STREET ADORESS CITY-ST-7/P CITY-ST-ZIP FT-SMITH AR. Delete TITLE ☐ Change Addition TITLE NAME BOREHAM JR, R S NAME STREET ADDRESS STREET ADDRESS 2514 SOUTH 46TH ST CITY-ST-78 CITY-ST-ZIP FORT SMITH, AR 00000 COO TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME DAVIS, LLOYD NAME STREET ADDRESS 1816 BRAMBLE BRAE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. SMITH AR TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME PEERBOLTE, JERRY D. NAME STREET ADDRESS 2212 BRIGADOON STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP FT SMITH AR TITLE ☐ Delete TITLE ☐ Change Addition MCFARLAND, JOHN A NAME NAME STREET ADDRESS 10413 STONELEIGE STREET ADDRESS

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

FT SMITH AR

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SOI ~ 646-471/ Daytime Phone #