

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000001401

Entity Name: AERO-METRIC, INC.

FILED
Apr 16, 2004
Secretary of State

Current Principal Place of Business:

4020 TECHNOLOGY PARKWAY
SHEBOYGAN, WI 53083

New Principal Place of Business:

Current Mailing Address:

4020 TECHNOLOGY PARKWAY
SHEBOYGAN, WI 53083

New Mailing Address:

FEI Number: 39-1133181

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCHUR, BERNARD
Address: 4020 TECHNOLOGY PARKWAY
City-St-Zip: SHEBOYGAN, WI 53083 US

Title: V () Delete
Name: OLSON, PAT
Address: 4020 TECHNOLOGY PARKWAY
City-St-Zip: SHEBOYGAN, WI 53083 US

Title: T () Delete
Name: CAROLLO, NORBERT A
Address: 4020 TECHNOLOGY PARKWAY
City-St-Zip: SHEBOYGAN, WI 53083 US

Title: SD () Delete
Name: LANGFORD, DON
Address: OAKBROOK TERRACE TOWER STE 2242 1 TOWER LN
City-St-Zip: OAK BROOK, IL 60181 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NORBERT A. CAROLLO

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04/16/2004

Electronic Signature of Signing Officer or Director

_____ Date