

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005700

FILED  
Apr 10, 2008  
Secretary of State

Entity Name: HUSSMANN SERVICES CORPORATION

**Current Principal Place of Business:**

3004 SPRING INDUSTRIAL DR  
SUITE C  
POWDER SPRINGS, GA 30127

**New Principal Place of Business:**

**Current Mailing Address:**

12999 ST. CHARLES ROCK ROAD  
BRIDGETON, MO 63044

**New Mailing Address:**

FEI Number: 76-0569920      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: S/D ( ) Delete  
Name: SANTORD, BARBARA A  
Address: 155 CHESTNUT RIDGE ROAD  
City-St-Zip: MONTVALE, NJ 07645

Title: D ( ) Delete  
Name: NACHTIGAL, PATRICIA  
Address: 155 CHESTNUT RIDGE ROAD  
City-St-Zip: MONTVALE, NJ 07645

Title: VP ( ) Delete  
Name: BLASE, MARIA  
Address: 12999 ST. CHARLES ROCK  
City-St-Zip: BRIDGETON, MO 63044

Title: VPAS ( ) Delete  
Name: HOSTETLER, BRIAN J  
Address: 12999 ST. CHARLES ROCK  
City-St-Zip: BRIDGETON, MO 63044

Title: P ( ) Delete  
Name: SHAWLEY, STEVE R  
Address: 12999 ST. CHARLES ROCK ROAD  
City-St-Zip: BRIDGETON, MO 63044

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: S/D (X) Change ( ) Addition  
Name: SANTORO, BARBARA A  
Address: 155 CHESTNUT RIDGE ROAD  
City-St-Zip: MONTVALE, NJ 07645

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 exemption stated in Chapter 119, 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: BRIAN J HOSTETLER

VPAS

04/10/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date