


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008 8:00 am
Secretary of State

05-01-2008 90241 003 ***150.00

DOCUMENT # F05000004159

1. Entity Name
GEHL FINANCE, INC.



Principal Place of Business 143 WATER STREET WEST BEND, WI 53095	Mailing Address 143 WATER STREET WEST BEND, WI 53095
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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04282008 Chg-P CR2E034 (12/06)

4. FEI Number 39-0300430	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
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
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOD GEHL, WILLIAM D 143 WATER STREET WEST BEND, WI 53095 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCOO MOORE, MALCOLM F 143 WATER STREET WEST BEND, WI 53095 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FEUCHT, KENNETH H 143 WATER STREET WEST BEND, WI 53095 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KEYES, DANIEL M 143 WATER STREET WEST BEND, WI 53095 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS MULCAHY, MICHAEL J 143 WATER STREET WEST BEND, WI 53095 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFO RETTLER, THOMAS M 143 WATER STREET WEST BEND, WI 53095 <input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Michael J. Mulcahy* **4/29/08** **262-334-6641**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT 40091309

STATE OF FLORIDA #FO500004159
2008 FOR PROFIT CORPORATION ANNUAL REPORT

11. Additions/Changes to Officers and Directors		
Title	Vice President Manufacturing Operations (V)	<input type="checkbox"/> Change
Name	Daniel L. Miller	
Street Address	143 Water Street	<input checked="" type="checkbox"/> Addition
City-ST-Zip	West Bend, WI 53095	
Title	Vice President (V) & Treasurer (T)	<input type="checkbox"/> Change
Name	James J. Monnat	
Street Address	143 Water Street	<input checked="" type="checkbox"/> Addition
City-ST-Zip	West Bend, WI 53095	
Title	Vice President Information Technology (V)	<input type="checkbox"/> Change
Name	Ed Delaporte	
Street Address	143 Water Street	<input checked="" type="checkbox"/> Addition
City-ST-Zip	West Bend, WI 53095	
Title	Vice President Human Resources (V)	<input type="checkbox"/> Change
Name	Brian Pearlman	
Street Address	143 Water Street	<input checked="" type="checkbox"/> Addition
City-ST-Zip	West Bend, WI 53095	
Title	Director (D)	<input type="checkbox"/> Change
Name	Bruce D. Hertzke	
Street Address	143 Water Street	<input checked="" type="checkbox"/> Addition
City-ST-Zip	West Bend, WI 53095	
Title	Director (D)	<input type="checkbox"/> Change
Name	Thomas J. Boldt	
Street Address	143 Water Street	<input checked="" type="checkbox"/> Addition
City-ST-Zip	West Bend, WI 53095	
Title	Director (D)	<input type="checkbox"/> Change
Name	Marcel-Claude Braud	
Street Address	143 Water Street	<input checked="" type="checkbox"/> Addition
City-ST-Zip	West Bend, WI 53095	
Title	Director (D)	<input type="checkbox"/> Change
Name	John T. Byrnes	
Street Address	143 Water Street	<input checked="" type="checkbox"/> Addition
City-ST-Zip	West Bend, WI 53095	
Title	Director (D)	<input type="checkbox"/> Change
Name	Richard J. Fotsch	
Street Address	143 Water Street	<input checked="" type="checkbox"/> Addition
City-ST-Zip	West Bend, WI 53095	
Title	Director (D)	<input type="checkbox"/> Change
Name	John V. Splude	
Street Address	143 Water Street	<input checked="" type="checkbox"/> Addition
City-ST-Zip	West Bend, WI 53095	
Title	Director (D)	<input type="checkbox"/> Change
Name	Dr. Hermann Viets	
Street Address	143 Water Street	<input checked="" type="checkbox"/> Addition
City-ST-Zip	West Bend, WI 53095	