

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000007240

FILED  
Feb 23, 2012  
Secretary of State

Entity Name: OLIVER PRODUCTS COMPANY

**Current Principal Place of Business:**

445 SIXTH ST NW  
GRAND RAPIDS, MI 49504

**New Principal Place of Business:**

**Current Mailing Address:**

445 SIXTH ST NW  
GRAND RAPIDS, MI 49504

**New Mailing Address:**

FEI Number: 38-2363773

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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: MYERS, GREGORY J  
Address: 411 E WISCONSIN AVE STE 1280  
City-St-Zip: MILWAUKEE, WI 53202

Title: D  
Name: RADTKE, JAY J  
Address: 411 E WISCONSIN AVE STE 1280  
City-St-Zip: MILWAUKEE, WI 53202

Title: D  
Name: NILSTOFT, CLAS M  
Address: 3741 N LAKESHORE DR  
City-St-Zip: HARBOR SPRINGS, MI 49740

Title: PD  
Name: BENNISH, GERALD E JR  
Address: 445 SIXTH ST NW  
City-St-Zip: GRAND RAPIDS, MI 49504

Title: CFO  
Name: SLUSAREK, DONALD H  
Address: 445 6TH ST NW  
City-St-Zip: GRAND RAPIDS, MI 49504

Title: D  
Name: MCDANIEL, GARY  
Address: 445 6TH ST NW  
City-St-Zip: GRAND RAPIDS, MI 49504

I hereby 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 all other like empowered.

SIGNATURE: GERALD E. BENNISH, JR.

PD

02/23/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date