

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000006197

FILED
Apr 30, 2008
Secretary of State

Entity Name: SPECIALTY MOTORS OPERATIONS, INC.

Current Principal Place of Business:

402 EAST HAVEN STREET
EATON RAPIDS, MI 48827

New Principal Place of Business:

Current Mailing Address:

402 EAST HAVEN STREET
EATON RAPIDS, MI 48827

New Mailing Address:

FEI Number: 26-1424852 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: D () Delete
Name: ALGER, MIKE
Address: 5200 TOWN CENTER CIRCLE, SUITE 600
City-St-Zip: BOCA RATON, FL 33486

Title: D () Delete
Name: FINNIGAN, DAVID
Address: 5200 TOWN CENTER CIRCLE, SUITE 600
City-St-Zip: BOCA RATON, FL 33486

Title: D (X) Delete
Name: CALHOUN, KEVIN
Address: 5200 TOWN CENTER CIRCLE, SUITE 600
City-St-Zip: BOCA RATON, FL 33486

Title: VPAS () Delete
Name: HALLANGER, DAN
Address: 402 EAST HAVEN ST
City-St-Zip: BATON RAPIDS, MI 48827

Title: AT () Delete
Name: HALLANGER, DAN
Address: 402 EAST HAVEN ST
City-St-Zip: BATON RAPIDS, MI 48827

Title: AS () Delete
Name: WEBB, CASEY CFO
Address: 402 EAST HAVEN ST
City-St-Zip: BATON RAPIDS, MI 48827

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: D (X) Change () Addition
Name: RYDER, MARC
Address: 402 EAST HAVEN ST
City-St-Zip: BATON RAPIDS, MI 48827

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

Title: AS (X) Change () Addition
Name: AULT, STEVEN CFO
Address: 402 EAST HAVEN ST
City-St-Zip: BATON RAPIDS, MI 48827

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: STEVEN AULT

_____ Electronic Signature of Signing Officer or Director

AS

04/30/2008

_____ Date