

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000001346

FILED  
Jan 29, 2007  
Secretary of State

Entity Name: SAUDER MANUFACTURING CO.

**Current Principal Place of Business:**

930 W BARRE RD  
ARCHBOLD, OH 43502 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 230  
ARCHBOLD, OH 43502 US

**New Mailing Address:**

FEI Number: 34-4407705      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GRABER, DOUGLAS  
1752 APEX ROAD  
SARASOTA, FL 34240 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: CH ( ) Delete  
Name: MILLER, VIRGIL  
Address: 22494 COUNTY ROAD B  
City-St-Zip: ARCHBOLD, OH 43502

Title: D ( ) Delete  
Name: SAUDER, MAYNARD  
Address: 3515 WESTWOOD DRIVE  
City-St-Zip: ARCHBOLD, OH 43502

Title: TDS ( ) Delete  
Name: BORTON, RONALD E  
Address: 312 NORTHPOINTE DRIVE  
City-St-Zip: ARCHBOLD, OH 43502

Title: D ( ) Delete  
Name: SAUDER, DAN  
Address: 3411 COUNTY ROAD 20  
City-St-Zip: ARCHOLD, OH 43502

Title: D ( ) Delete  
Name: SAUDER, KEVIN  
Address: 26505 CO RD F  
City-St-Zip: ARCHBOLD, OH 43502

Title: D ( ) Delete  
Name: MOSHIER, ARNOLD  
Address: 109 QUAIL RUN  
City-St-Zip: ARCHBOLD, OH 43502

**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:

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 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: BETH EHINGER

Electronic Signature of Signing Officer or Director

ACCT

01/29/2007

\_\_\_\_\_ Date