

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 NOV -1 AM 11:15

DOCUMENT # F96000006174

1. Corporation Name

SENSTAR FINANCE COMPANY

Principal Place of Business

Mailing Address

~~1 RIVERFRONT PLACE
NEWPORT KY 41071~~

~~1 RIVERFRONT PLACE
NEWPORT KY 41071~~



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
301 Grant Street

3. New Mailing Office Address, If Applicable
301 Grant Street

REINSTATEMENT 00

Suite, Apt. #, etc.
Suite 3650

Suite, Apt. #, etc.
Suite 3650

4. Date Incorporated or Qualified To Do Business in Florida
11/25/1996

City & State
Pittsburgh, PA

City & State
Pittsburgh, PA

5. FEI Number
25-1709899

Zip Country
15219-1413 USA

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15219-1413 USA

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Offices and/or Director	City & State
1	2 PLEASE SEE ATTACHED		
D	BELL, DONALD C	1 RIVERFRONT PLACE	NEWPORT KY 41071
V	JAMES, RAYMOND A	1 OXFORD CTR, 301 GRANT ST.	PITTSBURG PA 15219
PTD	HOFMANN, LAWRENCE G JR	1 OXFORD CTR, 301 GRANT ST.	PITTSBURG PA 15219
V	WELLS, CHARLES S	1 OXFORD CTR, 301 GRANT ST.	PITTSBURG PA 15219
V	TUCKER, KEITH J	1 OXFORD CTR, 301 GRANT ST.	PITTSBURG PA 15219
S	BAILEY, MARK W	1 RIVERFRONT PLACE	NEWPORT KY 41071

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

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

Name _____
Street Address (P.O. Box Number is Not Acceptable) _____
Suite, Apt. #, Etc. _____
City _____ State **FL** Zip Code _____

10. I, being appointed the registered agent of the above named corporation, am familiar with the obligations of Section 607.0505, F.S.

Signature of Registered Agent Barbara A. Burke SPECIAL ASSISTANT SECRETARY
REGISTERED AGENT MUST SIGN

Date 10-31-00

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: SIGNATURE REQUIRED Anne Schwendinger, Asst Sec'y. 10/23/00 412.594.3017
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

SENSTAR FINANCE COMPANY
Tax I.D. # 25-1709899

I. Officers

<u>Name</u>	<u>Office</u>
Lawrence G. Hofmann, Jr. ¹	President and Treasurer
Raymond A. James ²	Vice President and Secretary
Keith J. Tucker ¹	Vice President
Jon D. Volkert ²	Vice President
Steven E. Warren ²	Vice President
Charles S. Wells ¹	Vice President
Thomas K. Jarrett ³	Assistant Treasurer
Alan L. Moose ²	Assistant Treasurer
Jo Anne Schwendinger ¹	Assistant Secretary

II. Directors

- Lawrence G. Hofmann, Jr.¹
- James R. Heseman²
- James A. Israel²
- Jon D. Volkert²
- Steven E. Warren²

III. Addresses

The address of all officers and directors whose names are followed by a ¹ is:

301 Grant Street, Suite 3650
Pittsburgh, Pennsylvania 15219

The address of all officers and directors whose names are followed by a ² is:

6400 N.W. 86 Street
Johnston, Iowa 50131

The address of the officer whose name is followed by a ³ is:

One John Deere Place
Moline, Illinois 61265