


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # F99000002385	
1. Entity Name F.L.SMIDTH INC.	

Principal Place of Business 2040 AVE. C BETHLEHEM, PA 18017-2188	Mailing Address 2040 AVE. C BETHLEHEM, PA 18017-2188
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DO NOT WRITE IN THIS SPACE



04262007 No Chg-P CR2E034 (11/05)

4. FEI Number 23-0606560	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CB RASMUSSEN, JORGEN HUND 2040 AVE. C BETHLEHEM, PA 180172188
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP JEPSEN, OVE L 2040 AVE. C BETHLEHEM, PA 180172188
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C MCCANDLESS, RALPH J III 2040 AVE. C BETHLEHEM, PA 180172188
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JEPSEN, CHRISTIAN 2040 AVE. C BETHLEHEM, PA 180172188
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFS VANSYCKLE, TIMOTHY J 2040 AVE. C BETHLEHEM, PA 180172188
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CHABIN, KEVIN 2040 AVE. C BETHLEHEM, PA 180172188

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05/16/07-80069-008 150.00

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: Ralph M. McCandless 4/24/07 610-264-6969
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #