

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 10, 2001 8:00 am
Secretary of State

04-10-2001 90041 007 ***150.00

DOCUMENT # P08647

1. Entity Name
GENERAL CABLE INDUSTRIES, INC.

Principal Place of Business 4 TESSENEER DR. HIGHLAND HEIGHTS KY 41076	Mailing Address 4 TESSENEER DR. HIGHLAND HEIGHTS KY 41076
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 06-1009714		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent							
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				Name							
				Street Address (P.O. Box Number is Not Acceptable)							
				City				FL		Zip Code	

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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS				12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	P	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	KENNY, GREGORY B			NAME			
STREET ADDRESS	4945 BURLEY HILLS DR			STREET ADDRESS			
CITY-ST-ZIP	CINCINNATI OH 45243			CITY-ST-ZIP			
TITLE	EVSD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SIVERD, ROBERT J			NAME			
STREET ADDRESS	8051 BRILL RD.			STREET ADDRESS			
CITY-ST-ZIP	CINTI OH			CITY-ST-ZIP			
TITLE	VTD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	VIRGULAK, CHRISTOPHER			NAME			
STREET ADDRESS	8124 STARTING GATE LN			STREET ADDRESS			
CITY-ST-ZIP	CINT. OH			CITY-ST-ZIP			
TITLE	AS	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	WHELAN, JEFFERY J			NAME			
STREET ADDRESS	9006 PATRICKS GLEN			STREET ADDRESS			
CITY-ST-ZIP	CINCINNATI OH 45242			CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jeffrey J. Whelan **Jeffrey J. Whelan** 3-30-01 **3-30-01** 859-572-8000 **859-572-8000**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)



Document
#D08647

Corporate Tax Department
Telephone: 859-572-8732
Facsimile: 859-572-0016

April 5, 2001

524444

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

CORPORATION REPORTING:	GENERAL CABLE INDUSTRIES
TAX RETURN SUBMITTED:	FLORIDA UNIFORM BUSINESS REPORT
PERIOD COVERED:	2001
REMITTANCE ENCLOSED:	\$150
REFUND REQUESTED:	\$-0-
OVERPAYMENT TO BE APPLIED:	\$-0-

All correspondence regarding the above return should be directed to the Corporate Tax Department at the address below. Please acknowledge receipt of the enclosures by date stamping and returning a copy of this letter in the self-addressed stamped envelope provided.

Thank you.

Enclosures

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4 Tesseneer Drive
Highland Heights, KY 41076-9753, USA
tel: (1) 859.572.8000
fax: (1) 859.572.8458
web: www.generalcable.com



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