

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P40406

FILED  
Feb 09, 2007  
Secretary of State

Entity Name: PIERCE MANUFACTURING INC.

## Current Principal Place of Business:

2600 AMERICAN DRIVE  
APPLETON, WI 54915 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 2017  
APPLETON, WI 549132017

## New Mailing Address:

FEI Number: 39-0139830

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## 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: P ( ) Delete  
Name: RANDJELOVIC, JOHN  
Address: 2600 AMERICAN DRIVE  
City-St-Zip: APPLETON, WI 54913

Title: CEO ( ) Delete  
Name: BOHN, ROBERT G  
Address: 2307 OREGON STREET  
City-St-Zip: OSHKOSH, WI 54902

Title: EVP (X) Delete  
Name: MEADERS, MARK A  
Address: 2600 AMERICAN DRIVE  
City-St-Zip: APPLETON, WI 54913

Title: VCFO ( ) Delete  
Name: SZEWS, CHARLES L  
Address: 2307 OREGON STREET  
City-St-Zip: OSHKOSH, WI 54902

Title: T ( ) Delete  
Name: SAGEHORN, DAVE M  
Address: 2307 OREGON STREET  
City-St-Zip: OSHKOSH, WI 54902

Title: EVPS ( ) Delete  
Name: BLANKFIELD, BRYAN J  
Address: 2307 OREGON STREET  
City-St-Zip: OSHKOSH, WI 54902

## 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: BRYAN J. BLANKFIELD

EVPS

02/09/2007

Electronic Signature of Signing Officer or Director

Date