

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F03000000725

**FILED**  
**Mar 28, 2022**  
**Secretary of State**  
**1290179728CC**

**Entity Name:** AIRTEX MANUFACTURING, INC.

**Current Principal Place of Business:**

32050 W 83RD ST  
DESOTO, KS 66018

**Current Mailing Address:**

32050 W 83RD ST  
DESOTO, KS 66018 US

**FEI Number:** 74-2834521

**Certificate of Status Desired:** No

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

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

*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

**Officer/Director Detail :**

Title           TREASURER  
Name           WRIGHT, LAINE  
Address        32050 W 83RD ST  
City-State-Zip: DESOTO KS 66018

Title           SECRETARY  
Name           WRIGHT, LAINE  
Address        32050 W 83RD ST  
City-State-Zip: DESOTO KS 66018

Title           DIRECTOR  
Name           HANSEN, PAUL  
Address        32050 W 83RD ST  
City-State-Zip: DESOTO KS 66018

Title           PRESIDENT  
Name           HANSEN, PAUL  
Address        32050 W 83RD ST  
City-State-Zip: DESOTO KS 66018

Title           DIRECTOR  
Name           TAYLOR, DON  
Address        32050 W 83RD ST  
City-State-Zip: DESOTO KS 66018

Title           DIRECTOR  
Name           TAYLOR, DAVID  
Address        32050 W 83RD ST  
City-State-Zip: DESOTO KS 66018

Title           DIRECTOR  
Name           WRIGHT, LAINE  
Address        32050 W 83RD ST  
City-State-Zip: DESOTO KS 66018

Title           DIRECTOR  
Name           HUENE, TIM  
Address        32050 W 83RD ST  
City-State-Zip: DESOTO KS 66018

*I hereby 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 all other like empowered.*

**SIGNATURE:** PAUL HANSEN

**PRESIDENT**

**03/28/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date