

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000005348

Entity Name: PRODUCT FABRICATION SERVICE CORPORATION**Current Principal Place of Business:**1507 MATT PASS
COTTAGE GROVE, WI 53527-8962**Current Mailing Address:**1507 MATT PASS
COTTAGE GROVE, WI 53527-8962 US**FEI Number: 39-1301594****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301 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	D
Name	LARSON, MICHAEL
Address	313 EVERGLADE DRIVE
City-State-Zip:	MADISON WI 53717

Title	D
Name	MULLEN, TERRENCE
Address	1006 FRANCONIA CT
City-State-Zip:	WAUNAKEE WI 53597

Title	DIRECTOR
Name	WINISTORFER, STEVE G
Address	919 MAGDELINE DR.
City-State-Zip:	MADISON WI 53704

Title	D
Name	TRAMBURG, ROBERT S
Address	8385 S KOLLATH RD
City-State-Zip:	VERONA WI 53593

Title	DIRECTOR
Name	HUSOM, JAMES J
Address	7737 WESTMAN WAY
City-State-Zip:	MIDDLETON WI 53562

Title	TREASURER
Name	MCDANIEL, DEBRA S
Address	406 LEWELLEN ST.
City-State-Zip:	MARSHALL WI 53559

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: DEBRA S. MCDANIEL**TREASURER****03/06/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date