## 2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000468

**Entity Name: THERMWOOD CORPORATION** 

**Current Principal Place of Business:** 

904 BUFFALOVILLE RD DALE. IN 47523

**Current Mailing Address:** 

**PO BOX 436** 

**DALE. IN 47523 US** 

FEI Number: 35-1169185 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED 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: MARK WILLIAMS 01/15/2018

Electronic Signature of Registered Agent

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR

NameSUSNJARA, JASONNameWATT, JENNIFERAddress120 W WHITE PINE DRAddress8960 SNOWBERRY CT

City-State-Zip: SANTA CLAUS IN 47579 City-State-Zip: ZIONSVILLE IN 46077

Title DIRECTOR Title PRESIDENT

NameSUSNJARA, KENNETHNameHILDENBRAND, DAVIDAddress26872 CHAPLIN RDAddress4211 W HILCREST DRCity-State-Zip:BIRDSEYE IN 47513City-State-Zip:JASPER IN 47546

Title VICE-PRESIDENT Title SECRETARY

Name HARDESTY, MICHAEL Name SUSNJARA, LINDA

Address 11555 E STATE ROAD 68 Address 26872 CHAPLIN RD

City-State-Zip: DALE IN 47523 City-State-Zip: BIRDSEYE IN 47513

City-State-Zip: DALE IN 47523

Title TREASURER

Name FEHRIBACH, DEAN

Address 2325 LEAF DR

City-State-Zip: FERDINAND IN 47532

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: DEAN FEHRIBACH TREASURER 01/15/2018

Electronic Signature of Signing Officer/Director Detail

Date

FILED Jan 15, 2018

**Secretary of State** 

CC2051284649

Date