

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P40406

Entity Name: PIERCE MANUFACTURING INC.**Current Principal Place of Business:**2600 AMERICAN DRIVE
APPLETON, WI 54915**Current Mailing Address:**P.O. BOX 2017
APPLETON, WI 54913-2017**FEI Number:** 39-0139830**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	P
Name	JOHNSON, JAMES W
Address	2600 AMERICAN DRIVE
City-State-Zip:	APPLETON WI 54913

Title	TREA
Name	GRENNIER, R. S
Address	2307 OREGON STREET
City-State-Zip:	OSHKOSH WI 54902

Title	CEO
Name	SZEWS, CHARLES L
Address	2307 OREGON STREET
City-State-Zip:	OSHKOSH WI 54902

Title	DCFO
Name	SAGEHORN, DAVE M
Address	2307 OREGON STREET
City-State-Zip:	OSHKOSH WI 54902

Title	EVPS
Name	BLANKFIELD, BRYAN J
Address	2307 OREGON STREET
City-State-Zip:	OSHKOSH WI 54902

Title	COO, DIRECTOR
Name	JONES, WILSON R.
Address	2307 OREGON STREET
City-State-Zip:	OSHKOSH WI 54902

Title	EXECUTIVE VICE PRESIDENT AND CHIEF HUMAN RESOURCES OFFICER
Name	HOGAN, JANET L.
Address	2307 OREGON STREET
City-State-Zip:	OSHKOSH WI 59402

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: BRYAN J. BLANKFIELD**EVP AND SECRETARY****04/24/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date