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CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -1 PM 12:28

DOCUMENT # 309642 (7)

1. Corporation Name
ALPINE ENGINEERED PRODUCTS, INC.

Principal Place of Business	Mailing Address
1731 S.W. 7 AVE. P O BOX 2225 POMPANO BCH FL 33061	1731 S.W. 7 AVE. P O BOX 2225 POMPANO BCH FL 33061

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified: 10/06/1966	3a. Date of Last Report: 02/22/1994
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number: 59-1150310	Applied For / Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
Zip 24 / Country 25	Zip 29 / Country 30	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

REGIER, JAROLD W., ESQUIRE
1731 S.W. 7TH AVENUE
POMPANO BEACH 33060

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	☒ Change ☐ Addition
NAME	HARNDEN, CHARLES W	1.2 NAME	HARNDEN, CHARLES W.
STREET ADDRESS	~~4316 NE 22ND AVE~~	1.3 STREET ADDRESS	1731 SW 7th Avenue
CITY-ST-ZIP	~~FT LAUDERDALE, FL 00000~~ 33308	1.4 CITY-ST-ZIP	Pompano Beach, FL 33060
TITLE	VSD	2.1 TITLE	☒ Change ☐ Addition
NAME	MCALPINE, WILLIAM R	2.2 NAME	MCALPINE, WILLIAM R.
STREET ADDRESS	~~9451 NW 40TH ST~~	2.3 STREET ADDRESS	1731 SW 7th Avenue
CITY-ST-ZIP	~~CORAL SPRINGS, FL 00000~~ 33065	2.4 CITY-ST-ZIP	Pompano Beach, FL 33060
TITLE	V	3.1 TITLE	☒ Change ☐ Addition
NAME	DONNINI, RON R	3.2 NAME	DONNINI, RON R.
STREET ADDRESS	~~6701 NANTUCKET LANE~~	3.3 STREET ADDRESS	1801 S. Great SW Parkway
CITY-ST-ZIP	~~ARLINGTON TX 76017~~	3.4 CITY-ST-ZIP	Grand Prairie, TX 75051
TITLE	V	4.1 TITLE	☐ Change ☒ Addition
NAME	MCELVOGUE, DONALD R	4.2 NAME	V
STREET ADDRESS	2002 SYBIL LANE #400	4.3 STREET ADDRESS	WATSON, THOMAS J.
CITY-ST-ZIP	TYLER TX 75703	4.4 CITY-ST-ZIP	1731 SW 7th Avenue
TITLE	V	5.1 TITLE	Pompano Beach, FL 33060 ☒ Change ☐ Addition
NAME	HOOVER, CHARLES H	5.2 NAME	HOOVER, CHARLES H.
STREET ADDRESS	3570 PINE TREE LOOP	5.3 STREET ADDRESS	1950 Marley Drive
CITY-ST-ZIP	HAINES CITY FL 33844	5.4 CITY-ST-ZIP	Haines City, FL 33844
TITLE		6.1 TITLE	☐ Change ☒ Addition
NAME		6.2 NAME	V
STREET ADDRESS		6.3 STREET ADDRESS	BICKEL, KARL L.
CITY-ST-ZIP		6.4 CITY-ST-ZIP	10466 Baur Court
			St. Louis, MO 63132

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Thomas J. Watson 1/25/95 (305)781-3333
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Thomas J. Watson, V.P.-Finance

0436010 FP