

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **803601** (4)
1. Corporation Name
HUSSMANN CORPORATION



Principal Place of Business: **C/O TAX DEPARTMENT 12999 ST. CHARLES ROCK RD BRIDGETON MO 63044**
Mailing Address: **C/O TAX DEPARTMENT 12999 ST. CHARLES ROCK RD BRIDGETON MO 63044**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/23/1929	3a. Date of Last Report 05/01/1995
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 43-0156220	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				85	Zip Code

11. Pursuant to the provisions of Sections 607.0602 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 _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VOWELL, J.L.	1.2 NAME	
STREET ADDRESS	12999 ST CHARLES RK RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	BRIDGETON MO	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EVANS, J.C.	2.2 NAME	
STREET ADDRESS	12999 ST CHARLES PK RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	BRIDGETON MO	2.4 CITY-ST-ZIP	
TITLE	VP	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORGENTHALER, L. C.	3.2 NAME	
STREET ADDRESS	12999 ST CHARLES RK RD	3.3 STREET ADDRESS	
CITY-ST-ZIP	BRIDGETON MO	3.4 CITY-ST-ZIP	
TITLE	VP	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GLEASON, J.S.	4.2 NAME	
STREET ADDRESS	12999 ST CHARLES RK RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	BRIDGETON MO	4.4 CITY-ST-ZIP	
TITLE	VP	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHLEE, JOHN	5.2 NAME	
STREET ADDRESS	12999 ST CHARLES RK RD	5.3 STREET ADDRESS	
CITY-ST-ZIP	BRIDGETON MO	5.4 CITY-ST-ZIP	
TITLE	VP T	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DALLAS, R E	6.2 NAME	
STREET ADDRESS	12999 ST CHARLES ROCK RD	6.3 STREET ADDRESS	
CITY-ST-ZIP	BRIDGETON MI	6.4 CITY-ST-ZIP	

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)(k), 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: *R.E. Dallas*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
R.E. DALLAS-V.P. FINANCE

4-30-96 (314) 291-2000

CR2E034 (12/95)