

**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 06, 2000 8:00 am**  
**Secretary of State**

03-06-2000 90075 026 \*\*\*150.00

**DOCUMENT # 810763**

1. Entity Name

**EAGLE-PICHER INDUSTRIES, INC.**

Principal Place of Business

Mailing Address

**E. FIFTH STREET  
 500  
 OH 45202**

**P.O BOX 779  
 CINCINNATI OH 45201-0779  
 US**

00000000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **31-0268670**

Applied For  
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM  
 1200 S. PINE ISLAND ROAD  
 PLANTATION FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00  
 After MAY 1, 2000 Fee will be \$550.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	HALL, DAVID	
STREET ADDRESS	8200 BRILL RD.	
CITY-ST-ZIP	CINCINNATI OH	
TITLE	CD	<input type="checkbox"/> Delete
NAME	WYLER, JOEL P.	
STREET ADDRESS	8 KONIJNENLAAN	
CITY-ST-ZIP	2243 ER WASSENAAR NE	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	NEELY, HARRY A.	
STREET ADDRESS	459 TAM O'SHANTER COURT	
CITY-ST-ZIP	CINCINNATI OH	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	PETRY, THOMAS E	
STREET ADDRESS	4 LEXINGTON CIR	
CITY-ST-ZIP	TERACE PARK OH	
TITLE	PD	<input type="checkbox"/> Delete
NAME	RUIJSSENAARS, ANDRIES	
STREET ADDRESS	3021 ONONTA AVENUE	
CITY-ST-ZIP	CINCINNATI OH 45226	
TITLE	CEO	<input type="checkbox"/> Delete
NAME	RUIJSSENAARS, ANDRIES	
STREET ADDRESS	3021 ONONTA AVENUE	
CITY-ST-ZIP	CINCINNATI OH 45226	

TITLE	VP & CFO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Philip F. Schultz	
STREET ADDRESS	174 Washington Trace Road	
CITY-ST-ZIP	California, KY 41007	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Wayne R. Wickens	
STREET ADDRESS	7470 Pinehurst	
CITY-ST-ZIP	Cincinnati, OH 45255	
TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Gary M. Freytag	
STREET ADDRESS	5820 Windsong Court	
CITY-ST-ZIP	Cincinnati, OH 45243	
TITLE	VP & Controller	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Carroll D. Curless	
STREET ADDRESS	2117 Beechcreek Lane	
CITY-ST-ZIP	Cincinnati, OH 45233	
TITLE	VP & Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	David G. Krall	
STREET ADDRESS	7910 Deer Crossing	
CITY-ST-ZIP	Cincinnati, OH 45243	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	David N. Evans	
STREET ADDRESS	9802 Tollgate Lane	
CITY-ST-ZIP	Cincinnati, OH 45242	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE: By: David N. Evans, Vice President 2/28/00 513-629-2448**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)

EAGLE-PICHER INDUSTRIES, INC.  
250 E. Fifth Street, P.O. Box 779  
Cincinnati, Ohio 45201

Attachment  
0032625  
# 810763

NAMES AND ADDRESSES OF OFFICERS AND DIRECTORS

Dr. Wendelin Wiedeking  
Moltkestrasse 43  
D-74321 Bietigheim-Bissingen  
Germany

Director

Term Expires  
Indefinite

Daniel C. Wyler  
38-40 Elm Park Road  
London SW3 6AX England

Director

Indefinite