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Apr 30 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 814996

(5)

1. Corporation Name

BUCYRUS INTERNATIONAL, INC.



Principal Place of Business

1100 MILWAUKEE AVENUE
P O BOX 500
SOUTH MILWAUKEE WISCONSIN 53172-500
US

Mailing Address

1100 MILWAUKEE AVENUE
P O BOX 500
SOUTH MILWAUKEE WISCONSIN 53172-0500
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

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30

3. Date Incorporated or Qualified

01/13/1961

3a. Date of Last Report

04/22/1996

4. FEI Number

39-0188050

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

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

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

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

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

CEOP
HILDEBRAND, WILLIARD R
1100 MILWAUKEE AVE.
SO MILWAUKEE WI

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

CFOV
ANNAND, JAMES D
1100 MILWAUKEE AVE.
SO MILWAUKEE WI

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

V
SULLIVAN, TIMOTHY W.
1100 MILWAUKEE AVENUE
SOUTH MILWAUKEE WI

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

V
SCHWEITZER, ELROY F.
1100 MILWAUKEE AVE.
SO. MILWAUKEE WI

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

Hildebrand, Williard R.

☒ Change ☐ Addition

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

CFOV
Smoke, Daniel J.
1100 Milwaukee Avenue
South Milwaukee, WI 53172

☒ Change ☐ Addition

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

V
Onsager, Mike G.
1100 Milwaukee Avenue
South Milwaukee, WI 53172
S & Controller
Mackus, Craig R.
1100 Milwaukee Avenue
South Milwaukee, WI 53172

☐ Change ☐ Addition

☒ Change ☐ Addition

☐ Change ☒ Addition

☐ Change ☐ Addition

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14. I do 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 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 its 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 as an attachment with an address.

SIGNATURE

C. R. Mackus

4/21/97 (414) 768-4828

CR2E034 (9/96)