

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jul 16, 2007 08:00 AM
Secretary of State**

DOCUMENT # 824841

1. Entity Name
THE C.F. SAUER COMPANY



Principal Place of Business
**2000 WEST BROAD STREET
RICHMOND, VA 23220**

Mailing Address
**2000 WEST BROAD STREET
RICHMOND, VA 23220**



07122007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 54-0370900	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

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

**FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007**

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

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	T RADER, MICHELLE T 2000 WEST BROAD ST RICHMOND, VA 23220
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	SCFO UHLIK, WILLIAM 2000 WEST BROAD ST RICHMOND, VA 23220
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP SAUER, MARK A 2000 WEST BROAD ST RICHMOND, VA 23220
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SAUER, C F IV 2000 W BROAD STR RICHMOND, VA 23220
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CABELL, CHARLES L 2000 W BROAD STR RICHMOND, VA 23220
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP JAMESON, GEORGE R 2000 W BROAD STR RICHMOND, VA 23220
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07/16/07-80011-009 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

Michelle Rader *Michelle Rader*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-11-07
Date

804 359 5786
Daytime Phone #