

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 15, 2003 8:00 am**  
**Secretary of State**

04-15-2003 90096 040 \*\*\*150.00

**DOCUMENT # 826151**

1. Entity Name  
**UNITED DOMINION INDUSTRIES, INC.**



Principal Place of Business  
**700 TERRACE POINT DRIVE  
MUSKEGON MI 49443**

Mailing Address  
**700 TERRACE POINT DRIVE  
MUSKEGON MI 49443**

2. Principal Place of Business  
**13515 Ballantyne Corporate Place  
Charlotte, NC 28277**

3. Mailing Address  
**13515 Ballantyne Corporate Place  
Charlotte, NC 28277**



☒ CHECK HERE IF MAKING CHANGES

City & State		City & State		4. FEI Number <b>98-0013789</b>	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent <b>CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2003 Fee will be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD O'LEARY, PATRICK J 700 TERRACE POINT DRIVE MUSKEGON MI 49443</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Address Changes</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>13515 Ballantyne Corporate Place Charlotte, NC 28277</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VSD KEARNEY, CHRISTOPHER J 700 TERRACE POINT DRIVE MUSKEGON MI 49443</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>13515 Ballantyne Corporate Place Charlotte, NC 28277</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VDT WINOWIECKI, RON 700 TERRACE POINT DRIVE MUSKEGON MI 49443</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>13515 Ballantyne Corporate Place Charlotte, NC 28277</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>Assistant Treasurer Ronald Giza 13515 Ballantyne Corporate Place Charlotte, NC 28277</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**RONALD GIZA**

**SIGNATURE:** *Ronald Giza* **4/2/03** **231-724-5774**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)