

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-28-2005 90193 007 ***150.00

DOCUMENT # 827337

1. Entity Name
HARNISCHFEGER CORPORATION



Principal Place of Business
**4400 W NATIONAL AVE
MILWAUKEE, WI 53201 US**

Mailing Address
**100 E WISCONSIN AVENUE
STE 2780
MILWAUKEE, WI 53202 US**

14004744



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04182005 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number

39-0334430

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

**LEXIS DOCUMENT SERVICES INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301**

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. 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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **CD**
STREET ADDRESS **HANSON, JOHN N**
CITY-ST-ZIP **100 E. WISCONSIN AVENUE, SUITE 2780
MILWAUKEE, WI 53202**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **PD**
STREET ADDRESS **READINGER, MARK E**
CITY-ST-ZIP **4400 W. NATIONAL AVENUE
MILWAUKEE, WI 53214**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **ROOF, DONALD C**
CITY-ST-ZIP **100 E. WISCONSIN AVENUE, SUITE 2780
MILWAUKEE, WI 53202**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **V**
STREET ADDRESS **STANCZYK, THOMAS J**
CITY-ST-ZIP **4400 W NATIONAL AVE
MILWAUKEE, WI 53214**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME **S**
STREET ADDRESS **FONSTAD, ERIC B**
CITY-ST-ZIP **100 E. WISCONSIN AVENUE, SUITE 2780
MILWAUKEE, WI 53202**

TITLE ☒ Change ☐ Addition
NAME **Azar, Oren B.**
STREET ADDRESS **100 E. Wisconsin Avenue, Suite 2780**
CITY-ST-ZIP **Milwaukee, Wisconsin 53202**

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **STARK, KENNETH J**
CITY-ST-ZIP **4400 W. NATIONAL AVENUE
MILWAUKEE, WI 53214**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/25/05

414-319-8511

Harnischfeger Corporation

Additional Officers

Robbin L. Krueger

Assistant Secretary

100 E. Wisconsin Avenue, Suite 2780, Milwaukee, WI 53202

ATTACHMENT

14004744
827337